PAGE 1 / 182

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

	-or Other Than An Auth	orized Committee		Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M	5
WOMEN SPEAK OUT	PAC			
ADDRESS (number and street)	2776 S. Arlington Mill Dr.			
▼ Check if different	PO Box 803			
than previously reported. (ACC)	Arlington		L VA	22206
2. FEC IDENTIFICATION N	JMBER ▼ CITY	(▲	STATE ▲	ZIP CODE ▲
C C00530766	3. IS	THIS NEW (N) O		ENDED
4. TYPE OF REPORT (Choose One)	Report Due On:	20 (M2) May 20 (M		20 (M8) Nov 20 (M11) (Non-Election Year Only) 20 (M9) Dec 20 (M12)
(a) Quarterly Reports:		20 (M3) Jun 20 (N		(Non-Election Year Only)
April 15 Quarterly Report (0	01)	20 (M4) Jul 20 (M7		20 (M10) Jan 31 (YE)
July 15 Quarterly Report (0	(c) 12-Day PRE-Election	Primary (12P)	General (
October 15 Quarterly Report (0)	Report for the:	Convention (12C)	Special (125)
January 31 Year-End Report (Y	(E) Election	on 11 08	2022	in the State of
July 31 Mid-Year Report (Non-electio Year Only) (MY)	n (d) 30-Day POST-Election Report for the:	General (30G)	Runoff (3	0R) Special (30S)
Termination Report (TER)	Election	on/	/ Y Y Y Y	in the State of
5. Covering Period 10		through 10	/ D D / 19	2022
I certify that I have examined the Type or Print Name of Treasure	Gross, Jennifer, , ,	my knowledge and belief it is	true, correct and	complete.
Signature of Treasurer Gros	s, Jennifer, , ,	[Electronically Filed]	Date 10	/ D D / Y D Y D Y 2022
NOTE: Submission of false, erron	eous, or incomplete information	may subject the person signing	g this Report to th	ne penalties of 52 U.S.C. § 30109
Office Use				FEC FORM 3X Rev. 05/2016

SUMMARY PAGE

•	FEC Form 3X (Rev. 05/2016)	OF RECEIPTS AND DISBURSEMENTS	Page 2
٧	Write or Type Committee Name		
_	WOMEN SPEAK OUT PAC		
F	Report Covering the Period: From:	10 01 / 2022 To:	10 / 19 / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2022		546135.12
	(b) Cash on Hand at Beginning of Reporting Period	. 5319630.67	
	(c) Total Receipts (from Line 19)	4510947.00	11437427.00
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	. 9830577.67	11983562.12
7.	Total Disbursements (from Line 31)	. 2233887.28	4386871.73
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	. 7596690.39	7596690.39
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	. 0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	. 400174.50	
	This committee has qualified as a mu	lticandidate committee. (see FEC FORM 1M)	
		For further information contact:	
		Federal Election Commission 999 E Street, NW Washington, DC 20463	
		Toll Free 800-424-9530 Local 202-694-1100	

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

WOMEN SPEAK OUT PAC

1. Kecelpts 1. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	19 2022
1. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	COLUMN B
(a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	ilendar rear-to-Date
Than Political Committees (i) Itemized (use Schedule A)	
(i) Itemized (use Schedule A)	
(iii) TOTAL (add Lines 11(a)(i) and (iii)	2837090.31
(iii) TOTAL (add Lines 11(a)(i) and (iii)	
Lines 11(a)(i) and (ii)	9412.00
(b) Political Party Committees	
(c) Other Political Committees (such as PACs)	2846502.31
(c) Other Political Committees (such as PACs)	0.00
(such as PACs)	0.00
(stoff as PAS)	8470001.00
11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	0470001.00
Totals to Line 33, page 5)	
2. Transfers From Affiliated/Other Party Committees	11316503.31
Party Committees	4 4 4
3. All Loans Received	0.00
4. Loan Repayments Received	4 4
4. Loan Repayments Received	0.00
Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	4 4 4
Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	7 1 7 1 7
(Carry Totals to Line 37, page 5)	
S. Refunds of Contributions Made to Federal Candidates and Other Political Committees	97146.50
to Federal Candidates and Other Political Committees	45 45
7. Other Federal Receipts (Dividends, Interest, etc.)	
(Dividends, Interest, etc.)	0.00
8. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account (from Schedule H3)	4 4
(a) Non-Federal Account (from Schedule H3)	23777.19
(from Schedule H3)	45 45 45
(b) Levin Funds (from Schedule H5)	
(c) Total Transfers (add 18(a) and 18(b)) 9. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) 4510947.00	0.00
(c) Total Transfers (add 18(a) and 18(b)) 7. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) 4510947.00	
9. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) 4510947.00	0.00
9. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) 4510947.00	
12, 13, 14, 15, 16, 17, and 18(c))▶ 4510947.00	0.00
20. Total Federal Receipts	unt H3)
ints	1143742
(subtract Line 18(c) from Line 19) 4510947.00	11437427.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating	0.00	7 7
Expenditures	246814.41	672819.4
(c) Total Operating Expenditures	245244.44	672810.44
(add 21(a)(i), (a)(ii), and (b))► Transfers to Affiliated/Other Party	246814.41	672819.41
Committees	0.00	0.00
Contributions to Federal Candidates/Committees and Other Political Committees	0.00	0.00
Independent Expenditures	054447.00	2222200 24
(use Schedule E) Coordinated Party Expenditures (52 U.S.C. § 30116(d))	951147.26	2226900.34
(use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
Loans MadeRefunds of Contributions To:	0.00	0.00
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
Other Disbursements (Including		
Non-Federal Donations)	1035925.61	1487151.98
Federal Election Activity (52 U.S.C. § 30101(20) (a) Allocated Federal Election Activity (from Schedule H6)	0))	
(i) Federal Share	0.00	0.00
(ii) "Levin" Share(b) Federal Election Activity Paid	0.00	0.00
Entirely With Federal Funds	0.00	0.00
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	2222007 20	1206074 72
Total Federal Disbursements	2233887.28	4386871.73
(subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	2233887.28	4386871.73

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5 **COLUMN A** COLUMN B III. Net Contributions/ **Total This Period** Calendar Year-to-Date **Operating Expenditures** 33. Total Contributions (other than loans) 4510947.00 11316503.31 (from Line 11(d), page 3) 34. Total Contribution Refunds 0.00 0.00 (from Line 28(d))..... 35. Net Contributions (other than loans) 11316503.31 4510947.00 (subtract Line 34 from Line 33) 36. Total Federal Operating Expenditures 246814.41 672819.41 (add Line 21(a)(i) and Line 21(b))▶ 37. Offsets to Operating Expenditures 97146.50 0.00 (from Line 15, page 3)..... 38. Net Operating Expenditures 246814.41 575672.91 (subtract Line 37 from Line 36)

FOR	FOR LINE NUMBER:				PAGE	6	OF		182
(check only one)									
×	11a		11b		11c	12	2		
	13		14		15	16	6		17

	Statements may not be sold or used by any persone name and address of any political committee to	
NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC		
Full Name of Individual (Last, First, Middle In Armany, Jean, , ,) Mailing Address 101 Marian Ave City Glenshaw FEC ID number of contributing federal political committee. Name of Employer (for Individual) retired Receipt For: Primary General Other (specify)	State Zip Code PA 15116-1440 C Occupation (for Individual) retired Aggregate Year-to-Date ▼ 1000.00	Date of Receipt 10 12 2022 Transaction ID: SA11AI.44432 Amount of Each Receipt this Period 1000.00 Memo Item
Full Name of Individual (Last, First, Middle II Borchert, Steven, , , Mailing Address 1706 Whitby Avenue City Portage FEC ID number of contributing federal political committee. Name of Employer (for Individual) Retired Receipt For: Primary Other (specify) General	State Zip Code MI 49024-2552 C Occupation (for Individual) Retired Aggregate Year-to-Date ▼	Date of Receipt 10
Full Name of Individual (Last, First, Middle In Candeloro, Frank, , , Mailing Address 34 Mitchell Avenue City East Northport FEC ID number of contributing federal political committee. Name of Employer (for Individual) Information requested per best efforts Receipt For: Primary General Other (specify)	State Zip Code NY 11731-4507 C Occupation (for Individual) Information requested per best efforts Aggregate Year-to-Date ▼ 5000.00	Date of Receipt 10 11 2022 Transaction ID: SA11AI.44386 Amount of Each Receipt this Period 5000.00 Memo Item
SUBTOTAL of Receipts This Page (optional)	>	6025.00
TOTAL This Period (last page this line numbe	r only)	

F	FOR LINE NUMBER:					PAGE	7	OF		182
(check only one)										
	X	11a		11b		11c	12			
		13		14		15	16	6		17

Any information copied from such Reports and or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC			
Full Name of Individual (Last, First, Middle II Caster, Terrence, , , Mailing Address 4607 Mission Gorge Place	nitial) or Full Orga	nization Name	Date of Receipt
City	State	Zip Code	Transaction ID : SA11AI.44268
San Diego	CA	92120-4133	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		500000.00
Name of Employer (for Individual) Caster Properties Inc	Occupa Founde	ition (for Individual) er	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ar-to-Date ▼ 500000.00	
Full Name of Individual (Last, First, Middle II Cavanaugh, Gertrude, , , Mailing Address 8001 Southerly Rd	nitial) or Full Orga	nization Name	Date of Receipt
	Ta	I=	10 07 2022
City Baltimore	State MD	Zip Code 21225	Transaction ID : SA11AI.44333
FEC ID number of contributing federal political committee.	С	21220	Amount of Each Receipt this Period 500.00
Name of Employer (for Individual) Information requested per best efforts		ation (for Individual) ation requested per best efforts	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ar-to-Date ▼ 500.00	
Full Name of Individual (Last, First, Middle In Cooley, Jeff, , ,	nitial) or Full Orga	nization Name	Date of Receipt
Mailing Address 2357 E. Flossmoor Circle			10 07 2022
City Mesa	State AZ	Zip Code 85204	Transaction ID : SA11AI.44241
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
Name of Employer (for Individual) Retired	Occupa Retired	ation (for Individual)	Memo Item
Receipt For: Primary General	Aggregate Ye	ar-to-Date ▼	
Other (specify)	7	1000.00	
SUBTOTAL of Receipts This Page (optional)		•	501500.00
TOTAL This Period (last page this line number	r only)		

F	FOR LINE NUMBER:					PAGE	8	OF	182
(0	(check only one)								
	X	11a		11b		11c	12		
		13		14		15	16		17

			erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (IN F WOMEN SPEAK OU	,		
Full Name of Individual (Last, Cormier, Gerard, , , Mailing Address 63 Mason Ro	, First, Middle Initial) or Full On	rganization Name	Date of Receipt
	544		10 19 2022
City	State	Zip Code	Transaction ID : SA11AI.44336
Ashby	MA	01431-1835	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		100.00
Name of Employer (for Individual Information requested per bes	,	pation (for Individual) mation requested per best efforts	Memo Item
Receipt For: Primary Gener Other (specify) ▼		Year-to-Date ▼ 250.00]
Full Name of Individual (Last, Cox, Audrey, , , Mailing Address 14307 Shado	First, Middle Initial) or Full O	rganization Name	Date of Receipt
			10 06 2022
City	State	Zip Code	Transaction ID : SA11AI.44448
San Antonio	TX	78231-1639	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		5000.00
Name of Employer (for Indivi- Homemaker	′	upation (for Individual) nemaker	Memo Item
Receipt For: Primary Gener Other (specify) ▼		Year-to-Date ▼ 5000.00	
Full Name of Individual (Last, Dobrzenski, Frank, ,	, First, Middle Initial) or Full Or	rganization Name	Date of Receipt
Mailing Address 312 Altavista			10 01 2022
City Jacksonville	State NC	Zip Code 28546-8160	Transaction ID : SA11AI.44393
FEC ID number of contributin federal political committee.		20040 0100	Amount of Each Receipt this Period 150.00
Name of Employer (for Individ	·	upation (for Individual)	Memo Item
Expedient Resource Services Receipt For:	Princ	year-to-Date ▼	
Primary Gener Other (specify)		1500.00]
SUBTOTAL of Receipts This P	age (optional))	5250.00
TOTAL This Period (last page	this line number only)		

FOR LINE NUMBER:					PAGE	9	OF	1	182	
(check only one)										
	×	11a		11b		11c	12	2		
ΙГ		13		14		15	16	6		17

	Statements may not be sold or used by any pene name and address of any political committee	
NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC		
Full Name of Individual (Last, First, Middle I Donovan, Charles, , , Mailing Address 5394 Palisades Dr City Cincinnati FEC ID number of contributing federal political committee. Name of Employer (for Individual) Retired Receipt For: Primary General Other (specify)	Date of Receipt 10 13 2022 Transaction ID: SA11AI.44414 Amount of Each Receipt this Period 500.00 Memo Item	
Full Name of Individual (Last, First, Middle I Donovan, Charles, , , Mailing Address 5394 Palisades Dr City Cincinnati FEC ID number of contributing federal political committee. Name of Employer (for Individual) Retired Receipt For: Primary General Other (specify) ▼	Date of Receipt 10 19 2022 Transaction ID : SA11AI.44413 Amount of Each Receipt this Period 250.00 Memo Item	
Full Name of Individual (Last, First, Middle I Endres, Stephen, , , Mailing Address 105 Charmuth Road City Lutherville FEC ID number of contributing federal political committee. Name of Employer (for Individual) Emory Hill Receipt For: Primary General Other (specify)	State Zip Code MD 21093-5209 C Occupation (for Individual) CFO Aggregate Year-to-Date ▼	Date of Receipt 10 08 2022 Transaction ID: SA11AI.44326 Amount of Each Receipt this Period 35.00 Memo Item
SUBTOTAL of Receipts This Page (optional)	>	785.00
TOTAL This Period (last page this line number	er only)	

TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 10 OF

		, · ·	/	110	IVIDEI	•	17.00		٠.		
	Use separate schedule(s)	(ch	neck only	or	ne)						
	for each category of the Detailed Summary Page	[X 11a		11b		11c	12			
	Dotailed Carimially 1 age		13		14		15	16		17	
_											_

182

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Farrell, Peter, , , Date of Receipt Mailing Address P. O. Box 485 2022 10 City Zip Code State Transaction ID: SA11AI.44266 CA Kentfield 94914-0485 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Information requested per best efforts Information requested per best efforts Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Gambert, Deborah, , , Date of Receipt Mailing Address 5400 S 90th St 10 18 2022 City State Zip Code Transaction ID: SA11AI.44474 NE Lincoln 68526-9235 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Homemaker Homemaker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 250.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Hamilton, Kelly, Ann, Date of Receipt Mailing Address 178 Aspenknoll Dr 10 02 2022 City State Zip Code Transaction ID: SA11AI.44415 OH Powell 43065-7921 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) The Ohio State University Management Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 2250.00 SUBTOTAL of Receipts This Page (optional).....

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NOME (check only one)

F	OR	LINE	NU	MBER	:	PAGE	: ′	11	OF	182
(0	che	ck only	or	ne)						
	X	أا		الما		الما		ا ا		
	^	11a		11b		11c		12		
		13		14		15		16		17

y information copied from such Reports and Statements may not be sold or used by any person for this purpose of soliciting contributions for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) WOMEN SPEAK OUT PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Hegeman, Carmen, B., . Mailing Address 809 La Cruz Drive City Primary General Other (specify) ▼ State CO State Aggregate Vear-to-Date ▼ Primary Occupation (for Individual) Name of Employer (for Individual) Retired Receipt For: Primary General Other (specify) ▼ Aggregate Vear-to-Date ▼ Primary Occupation (for Individual) Retired Receipt For: Primary General Other (specify) ▼ Aggregate Vear-to-Date ▼ Primary Occupation (for Individual) Retired Receipt For: Primary General Other (specify) ▼ State Co State Retired Aggregate Vear-to-Date ▼ Date of Receipt Aggregate Vear-to-Date ▼ Date of Receipt Transaction ID: SA11AL44476 Amount of Each Receipt this Period EC		
, ,		
	Initial) or Full Organization Name	Date of Receipt
Mailing Address 809 La Cruz Drive		
•		
•	C	
Self Employed		Memo Item
Primary General		
Henkel, Raymond, , ,	Initial) or Full Organization Name	M M / D D / Y Y Y Y
•		Transaction ID : SA11Al.44272
· ·	C	250.00
		Memo Item
Primary General		
	Initial) or Full Organization Name	Date of Receipt
Mailing Address 18822 Grand Ave		
•		
ĕ	C	5000.00
ВР	,	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 5000.00	
SUBTOTAL of Receipts This Page (optional)	•	5350.00
TOTAL This Period (last page this line number	er only)	

FOR LINE NUMBER: PAGE 12 OF 182 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Koon, Edward, , , Date of Receipt Mailing Address 4381 Leonard Street 16 2022 City Zip Code State Transaction ID: SA11AI.44342 MI Coopersville 49404-9610 Amount of Each Receipt this Period FEC ID number of contributing C 35.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Universal Appraisers Appraiser Receipt For: Aggregate Year-to-Date ▼ Primary General 315.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Lansing, Mark & Suzanne, , , Date of Receipt Mailing Address 3761 Hillcrest Road 10 2022 City State Zip Code Transaction ID: SA11AI.44310 IΑ Dubuque 52002-2536 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CCCS of Iowa Advisor Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1000.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Lease, Craig & Phyllis, Date of Receipt Mailing Address 405 7th St N 11 2022 City State Zip Code Transaction ID: SA11AI.44309 IΑ Northwood 50459-1124 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Information requested per best efforts Information requested per best efforts Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1535.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... ___

FOR LINE NUMBER: PAGE 13 OF 182 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Loegering, Marilyn, , , Date of Receipt Mailing Address 15970 35th Street Southeast 2022 City Zip Code State Transaction ID: SA11AI.44396 ND Casselton 58012-9737 Amount of Each Receipt this Period FEC ID number of contributing C 20000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Retired Retired Receipt For: Aggregate Year-to-Date ▼ Primary General 20000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Macaulay, Shane, , , Date of Receipt Mailing Address 3832 132nd Avenue Northeast 10 05 2022 City State Zip Code Transaction ID: SA11AI.44464 WA Bellevue 98005-1308 Amount of Each Receipt this Period FEC ID number of contributing 2000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Radiology Consultants of WA Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 2000.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Martelli, Charles, , , Date of Receipt Mailing Address 5591 Gallery Park Drive 10 80 2022 City State Zip Code Transaction ID: SA11AI.44350 MI Ann Arbor 48103-5055 Amount of Each Receipt this Period FEC ID number of contributing C 220.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Information requested per best efforts Information requested per best efforts Receipt For: Aggregate Year-to-Date ▼ Primary General 660.00 Other (specify) 22220.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7 7

FOR LINE NUMBER: PAGE 14 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c 12

182

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Martelli, Charles, , , Date of Receipt Mailing Address 5591 Gallery Park Drive 2022 City Zip Code State Transaction ID: SA11AI.44348 MI Ann Arbor 48103-5055 Amount of Each Receipt this Period FEC ID number of contributing C 120.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Information requested per best efforts Information requested per best efforts Receipt For: Aggregate Year-to-Date ▼ Primary General 780.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Martelli, Charles, , , Date of Receipt Mailing Address 5591 Gallery Park Drive 10 19 2022 City State Zip Code Transaction ID: SA11AI.44349 MI Ann Arbor 48103-5055 Amount of Each Receipt this Period FEC ID number of contributing 120.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Information requested per best efforts Information requested per best efforts Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 900.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** McAlister, Donna, , , Date of Receipt Mailing Address PO Box 756 10 05 2022 City Zip Code State Transaction ID: SA11AI.44302 IL Wayne 60184-0756 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Retired Retired Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 490.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

F	OR	LINE	NU	MBER	:	PAGE	1	15	OF	•	182
(0	che	ck only	or	ıe)							
	X	11a		11b		11c		12			
		13		14		15		16			17

	Statements may not be sold or used by any pers he name and address of any political committee to	
NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC		
Full Name of Individual (Last, First, Middle I Salazar, Janet, , , Mailing Address 4445 Arcady Ave City Dallas FEC ID number of contributing federal political committee. Name of Employer (for Individual)	State Zip Code TX 75205-3604 C Occupation (for Individual)	Date of Receipt 10 05 2022 Transaction ID : SA11AI.44449 Amount of Each Receipt this Period 5000.00 Memo Item
Information requested per best efforts Receipt For: Primary General Other (specify) ▼	Information requested per best efforts Aggregate Year-to-Date ▼ 5002.00	
Full Name of Individual (Last, First, Middle I Sliter, Jeanette, , , Mailing Address 4014 Warrington Drive City Dallas	State Zip Code TX 75227-4330	Date of Receipt 10 11 2022 Transaction ID : SA11AI.44447 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer (for Individual) Retired Receipt For: Primary General	Occupation (for Individual) Retired Aggregate Year-to-Date National Process of State	Amount of Each Receipt this Period 2500.00 Memo Item
Other (specify) ▼ Full Name of Individual (Last, First, Middle I Turrentine, William, , , Mailing Address 131 Oak Manor Drive	2500.00 Initial) or Full Organization Name	Date of Receipt 10 19 2022
City San Luis Obispo FEC ID number of contributing federal political committee. Name of Employer (for Individual) Retired Receipt For: Primary General Other (specify)	State Zip Code CA 93405-2307 C Occupation (for Individual) Retired Aggregate Year-to-Date ▼	Transaction ID : SA11AI.44267 Amount of Each Receipt this Period 3500.00 Memo Item
SUBTOTAL of Receipts This Page (optional)	>	11000.00
TOTAL This Period (last page this line number	er only)	

FOR LINE NUMBER: F						PAGE	•	16	OF	182
(che	ck only	or	ne)						
	X	11a		11b		11c		12		
		13		14		15		16	;	17

	Statements may not be sold or used by any pe he name and address of any political committee	
NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC		
Full Name of Individual (Last, First, Middle I Wilson, Jerry, C., , Mailing Address 9962 Rockbrook Drive City Dallas FEC ID number of contributing federal political committee. Name of Employer (for Individual) Information requested per best efforts Receipt For: Primary General Other (specify)	Initial) or Full Organization Name State	Date of Receipt 10 18 2022 Transaction ID: SA11AI.44451 Amount of Each Receipt this Period 10000.00 Memo Item
Full Name of Individual (Last, First, Middle I Mailing Address City	Initial) or Full Organization Name State Zip Code	Date of Receipt
FEC ID number of contributing federal political committee. Name of Employer (for Individual) Receipt For:	Occupation (for Individual)	Amount of Each Receipt this Period Memo Item
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
Full Name of Individual (Last, First, Middle I	Initial) or Full Organization Name	Data of Bassint
Mailing Address City	State Zip Code	Date of Receipt
FEC ID number of contributing federal political committee. Name of Employer (for Individual)	Occupation (for Individual)	Amount of Each Receipt this Period Memo Item
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)		10000.00
TOTAL This Period (last page this line number	er only)	566405.00

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 17 OF 182										
TEMIZED RECEIPTS		for each category of the	(check only one)										
		Detailed Summary Page	11a 11b X 11c 12										
			13 14 15 16 17										
Any information copied from such Reports and or for commercial purposes, other than using the													
NAME OF COMMITTEE (In Full)													
WOMEN SPEAK OUT PAC													
Full Name of Individual (Last, First, Middle I CAMPAIGN FOR AMERICAN VALUE		rganization Name	Date of Receipt										
Mailing Address 2800 S SHIRLINGTON ROA	AD SUITE 930		10 14 2022										
City	State	Zip Code	Transaction ID : SA11C.44214										
ARLINGTON	VA	22206	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C cod	0489617	50000.00										
Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item										
Receipt For:	Aggregate	Year-to-Date ▼											
Primary General Other (specify) ▼		50000.00											
		7 7 7											
Full Name of Individual (Last, First, Middle I OPPORTUNITY MATTERS FUND		rganization Name	Date of Receipt										
Mailing Address PO BOX 9891			10 18 2022										
City	State	Zip Code	Transaction ID : SA11C.44210										
ARLINGTON	VA	22219	Amount of Each Receipt this Period 200000.00										
FEC ID number of contributing federal political committee.	C co	0825158											
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item Contribution										
Receipt For:	Aggregate	Year-to-Date ▼											
Primary General Other (specify) ▼		200000.00											
□ O.H.O. (Opens)/ ▼		4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1											
Full Name of Individual (Last, First, Middle I RESTORATION PAC	nitial) or Full O	rganization Name	Date of Receipt										
Mailing Address 1901 BUTTERFIELD ROAD STE. 120			10 06 2022										
City	State	Zip Code	Transaction ID : SA11C.44208										
DOWNERS GROVE	IL	60515	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C co	0571588	3218889.00										
Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item Contribution										
Receipt For: Primary General	Aggregate	Year-to-Date ▼											
Other (specify)		7751112.00											
SUBTOTAL of Receipts This Page (optional)			3468889.00										
TODITINE OF TIECEIPES THIS Fage (OPHOHAI)			-										

TOTAL This Period (last page this line number only).....

SI	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 18 OF 182							
			Use separate schedule(s)	(check only one)							
Ш	EMIZED RECEIPTS		for each category of the Detailed Summary Page	11a 11b X 11c 12							
_			Botalloa Garlinary Fago	13 14 15 16 17							
	ny information copied from such Reports and St for commercial purposes, other than using the										
	NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC										
_	Full Name of Individual (Last, First, Middle Initi	ial) or Full C	Organization Name								
Α.	RESTORATION PAC	iai) oi i uii c	nganization Name	Date of Receipt							
	Mailing Address 1901 BUTTERFIELD ROAD STE. 120			10 19 2022							
	City	State	Zip Code	Transaction ID : SA11C.44209							
	DOWNERS GROVE	IL	60515	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C co	0571588	468889.00							
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item Contribution							
	Receipt For:	Aggregate	Year-to-Date ▼	Contribution							
	Primary General	, iggi ogalo	8220001.00								
	Other (specify) ▼		0220001.00								
	Full Name of Individual (Last, First, Middle Initi	ial) or Full C	Organization Name								
В.				Date of Receipt							
	Mailing Address			M = M / D = D / Y = Y = Y							
	City	State	Zip Code								
				Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С									
	Name of Employer (for Individual)	Occ	supation (for Individual)	Memo Item							
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General	00 0									
	Other (specify) ▼		4 4 4								
C.	Full Name of Individual (Last, First, Middle Initial	ial) or Full C	Organization Name	Date of Receipt							
	Mailing Address			M = M / D = D / Y = Y = Y							
	City	State	Zip Code	Amount of Each Receipt this Period							
	FEC ID number of contributing			Amount of Each Receipt this Period							
	federal political committee.	C									
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item							
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General	33 - 3-40									
	Other (specify)		4 4 4								
	SURTOTAL of Receipts This Page (ontional)			468889.00							

TOTAL This Period (last page this line number only).....

3937778.00

17

SCHEDULE B (FEC Form 3X)	llee	wata aala aala da ()	FOR LINE	NUMBER: PAGE 19 OF 18							
ITEMIZED DISBURSEMENTS		rate schedule(s) category of the	(check onl] 26						
		Summary Page	X 21b 28a	22 28b	23 28c	26 27 29 30b					
Any information copied from such Departs and Statem	l nonte mou n	not he cold or us									
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam											
NAME OF COMMITTEE (In Full)											
WOMEN SPEAK OUT PAC											
Full Name (Last, First, Middle Initial)											
A. Abbott'S				Date of Disbursement							
Mailing Address 4791 Lake Avenue Rochester				10	16	2022					
City	State	Zip Code		EEC Idor	ntification N	umbor					
	NY	14612			illication iv	umber					
Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	rd Purchase	0									
Candidate Name		,				: SB21B.44498					
Salisada Harrio			Category/ Type	Amount o	ot Each Dis	bursement this Period					
Office Sought: House Disbursen	nent For:		.,,,,	1 1		33.01					
Senate	Primary	General			7	7 7					
	Other (spec	cify) ▼		★ Mem	o Item						
State: District:											
Full Name (Last, First, Middle Initial)				Doto of I	Disburseme	nt					
B. All Seasons Strategies, LLC											
Mailing Address P.O. Box 3521				10	01	2022					
,	State	Zip Code		FEC Ider	tification N	umber					
Spokane Purpose of Disbursement	WA	99202									
National Director Pay				C							
Candidate Name			Category/			: SB21B.44166 :bursement this Period					
	Туре			7 tinodite (bursonient this I chou						
Office Sought: House Disbursen				1 L	7	10500.00					
	Primary	General									
President State: District:	Other (spec	шу)		Mem	o Item						
Full Name (Last, First, Middle Initial)											
C. American Express				Date of [Disburseme	nt					
				M M	/ D D	/ Y Y Y Y Y					
Mailing Address Three World Financial Center				10	19	2022					
City 200 Vesey Street	State	Zip Code									
City New York	NY	10285		FEC Ider	tification N	umber					
Purpose of Disbursement		1		C							
Travel / Food/Beverage / Hiring Ads / Shipping / Sul	osctiptions				saction ID	: SB21B.4417(
Candidate Name			Category/	Amount of	of Each Dis	bursement this Period					
Office Sought: House Disbursen	nent For		Туре			164751.24					
	Primary	General			7	7 3 3 3					
	Other (spec			Maria	o Itom						
State: District:				Memo Item							
SUBTOTAL of Disbursements This Page (optional)			·····•		7	175251.24					
TOTAL This Desired (leak 1975)											
TOTAL This Period (last page this line number only).											

17

SCHEDULE B (FEC Form 3X)	He -	water activity	FOR LINE	NUMBER: PAGE 20 OF 18							
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the	(check only	· — · —	¬ ₀₀ ⊏] 26					
	Detailed	Summary Page	X 21b 28a	22 28b	23 28c	26 27 29 30b	1				
Any information copied from such Departs and Chater	onte mau	not be sold or us									
Any information copied from such Reports and Staten or for commercial purposes, other than using the nam											
NAME OF COMMITTEE (In Full)											
WOMEN SPEAK OUT PAC											
Full Name (Last, First, Middle Initial)											
A. EAN Services LLC				Date of Disbursement							
Mailing Address PO Box 402383				10 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y							
City	State	Zip Code		FEC Iden	tification N	umber					
Atlanta	GA	30384			uncation is	ullibel					
Purpose of Disbursement Travel / Tolls											
Candidate Name				1		: SB21B.44170					
Canadate Name			Category/ Type	Amount o	f Each Dis	bursement this	Period				
Office Sought: House Disbursen	nent For:		.,,,,			146.	.99				
	Primary	General			7	7					
	Other (spec	cify) ▼		★ Mem	o Item						
State: District:											
Full Name (Last, First, Middle Initial)				Doto of F)isburseme	nt					
B. Federal Express											
Mailing Address 3875 Airways Blvd				10	19	2022	- Y				
,	State	Zip Code		FEC Iden	tification N	umber					
Memphis Purpose of Disbursement	TN	38116									
Shipping				C							
Candidate Name			Category/			: SB21B.44170 sbursement this					
	Category/ Type ment For:			7 tillodili C	Toriou						
Office Sought: House Disbursen				1	75	2237.	.27				
	Primary	General			,	·					
President State: District:	Other (spec	city)		X Mem	o Item						
Full Name (Last, First, Middle Initial)											
C. Hilton Garden Inn				Date of D	isburseme	nt					
- Intoll Galdell IIII				M M	/ D D	/ Y Y Y	Y				
Mailing Address 7930 Jones Branch Drive				10	19	2022					
City	State	Zip Code		FFC Iden	tification N	umber					
McLean	VA	22102									
Purpose of Disbursement Travel / Lodging				C							
Candidate Name						: SB21B.4417(Dories				
			Category/ Type	Amount o	ı ⊏acn Dis	bursement this	renod				
Office Sought: House Disbursen	nent For:			1 1		27485	.87				
	Primary	General			,	,					
President	Other (spec	cify) 🔻		X Memo Item							
State: District:											
CURTOTAL of Dioburgomento This Dans (antique)						n	0.00				
SUBTOTAL of Disbursements This Page (optional)			······		7						
TOTAL This Period (last page this line number only)							1				

SC	CHEDULE B (FEC Form 3X)			R LINE	LINE NUMBER: PAGE 21 OF 182									
ITI	EMIZED DISBURSEMENTS	I for each actorony of the I '				(check only one)						07		
			Summary Page	'	21b 28a	22 28b	23	L	26		27 30b			
Δ	winformation conicd from such Deports and Chate			ad b./ a										
	y information copied from such Reports and State for commercial purposes, other than using the nar													
	NAME OF COMMITTEE (In Full)													
	WOMEN SPEAK OUT PAC													
^	Full Name (Last, First, Middle Initial)													
A.			Date of Disbursement 10 19 2022						Y					
	Mailing Address 1534 Sunset Blvd							19			2022			
	City	State OH	Zip Code 43952			FEC Id	lentificat	tion	Numl	ber				
	Steubenville Purpose of Disbursement	OH	С		-	-								
	Travel / Rental Cars													
	Candidate Name		Category/				ansaction		_		.44170 ent this P	oriod		
				Typ		Amoun	it of Lac	JII L	/ISDUI	301110	111 1113 1	enou		
	Office Sought: House Disburse	ment For:				11.					2662.0	3		
	Senate	Primary	General				,		,					
	State: President State:	Other (spe	ecify) 🔻			✗ M∈	emo Iter	n						
_														
R	Full Name (Last, First, Middle Initial) US Coachways					Date o	f Dishu	rsen	nent					
٥.	US Coachways					Date of Disbursement								
	Mailing Address 100 Saint Marys Avenue		10 19 2022											
	City	State	Zip Code			FFC Id	lentificat	tion	Numl	ber				
	Staten Island	NY							-					
	Purpose of Disbursement Travel / Bus Charters					C								
	Candidate Name						Transaction ID : SB21B.44170							
		Category/ Type				Amount of Each Disbursement this Period 24310.05								
	Office Sought: House Disburse													
	Senate	Primary					X Memo Item							
	President	Other (spe												
_	State: District:					Wieno item								
C.	Full Name (Last, First, Middle Initial) Moe's					Date o	f Disbui	rsen	nent					
	Mailing Address 16933 Kaufinger Street					10	/ D	19	_		2022	Y		
	Suite 180	Otat-	7:- 01											
	City Huntersville	State NC	Zip Code 28078			FEC Id	lentificat	tion	Numb	ber				
	Purpose of Disbursement	.,,	20070		-	С		Т						
	Food/Beverage						ansacti	on I	D · SI	R21R	44170			
	Candidate Name			Categ							nt this P	eriod		
	Office Sought: House Disburse	ment For:		Тур	e						1184.9	9		
	Senate Dispulse	Primary	General				-	-			110-1.0			
	President	Other (spe				V								
	State: District:	(-	- (-F)/ ▼				Memo Item							
Г	ı						-	-	=	_		-		
s	UBTOTAL of Disbursements This Page (optional).				▶		1 75			92	0.0	0		
\vdash					-		-	-	_			-		
I T	OTAL This Period (last page this line number only	·)			🕟					_				

S	CHEDULE B (FEC Form 3X)	T.,		LINE	INE NUMBER: PAGE 22 OF 182									
IT	EMIZED DISBURSEMENTS		category of the	k only				20 F						
			Summary Page	x	21b 28a	22 28b	23 28c		26 29	27 30b				
Γ.	over information coming from such Departs and Otata													
	ny information copied from such Reports and State for commercial purposes, other than using the na													
\setminus	NAME OF COMMITTEE (In Full)													
	WOMEN SPEAK OUT PAC													
	Full Name (Last, First, Middle Initial)					Data	f Diaha							
A.	Olive Garden					M M	f Disburs	ement	Υ	Y Y Y				
	Mailing Address 301 Hwy 114, Access Road					10 19 2022								
	City	State	Zip Code			FEC Identification Number								
	Grapevine Purpose of Dishurance at	TX	76051						-					
	Purpose of Disbursement Food/Beverage					C								
	Candidate Name				با		ansactio	_		_	t at			
				Catego Type		Amoun	t of Eacr	DISDU	rseme	ent this Pe	∍riod			
	Office Sought: House Disburse	ment For:		- 7 -		"		-		2222.32	·			
	Senate	Primary	General				7		,	-				
	President	Other (spe	ecify) 🔻			✗ Me	mo Item							
_	State: District:													
B.	Full Name (Last, First, Middle Initial) Panda Express					Date o	f Disburs	ement						
	Fallua Expless					M M / D D / Y Y Y Y								
	Mailing Address 1717 Walnut Grove Ave #100			10 19 2022										
	City	State	Zip Code			FEC Id	entification	on Nur	nber					
	Rosemead Purpose of Disbursement	CA	91770						-	-				
	Food/Beverage					С								
	Candidate Name			Catego	n/		insaction	_		.44170 ent this Pe	ariod			
				Type		Amoun	t of Laci	Disbu	1361116	1111 1113 1 6	illou			
	Office Sought: House Disburse	ment For:				ΙΙ.			-	993.04				
	Senate	Primary	General				,		,					
	President State: District:	Other (spe	ecify)			X Me	mo Item							
_	Full Name (Last, First, Middle Initial)													
C.	Facebook, Inc.					Date o	f Disburs	ement	V	Y W Y W Y				
	Mailing Address 1 Hacker Way					10		19		2022				
	City	State	Zip Code			FF0 14								
	Menlo Park	CA	94025			FEC IO	entification	n Nurr	iber					
	Purpose of Disbursement Hiring Ads					C								
	Candidate Name			Transaction ID: SB21B.4417(Amount of Each Disbursement this Period										
	Office Sought: House Disburse	ment For:						9060.30						
	Senate	Primary	General				7		,	- 4-	_			
	President	Other (spe	ecify) 🔻			X Me	mo Item							
	State: District:	- -				_ L		_						
5	SUBTOTAL of Disbursements This Page (optional).				. •		1 7		7	0.00)			
L						-					一			
ιī	OTAL This Period (last page this line number only	/)					_		_					

S	CHEDULE B (FEC Form 3X)			FOR LINE	NE NUMBER: PAGE 23 OF 182								
	EMIZED DISBURSEMENTS		arate schedule(s)	(check only	NOMBER.								
••			category of the Summary Page	X 21b	22 23 26 27								
_		Dotalied		28a	28b 28c 29 30b								
	ny information copied from such Reports and State for commercial purposes, other than using the na												
	NAME OF COMMITTEE (In Full)												
$ \rangle$	WOMEN SPEAK OUT PAC												
_	Full Name (Last, First, Middle Initial)												
Α.	Delta Airlines				Date of Disbursement								
	Mailing Address 1030 Delta Blvd				10 19 2022								
	City Atlanta	State GA	Zip Code 30354		FEC Identification Number								
	Purpose of Disbursement		30334		C								
	Travel / Airfare				Transaction ID : SB21B.44170								
	Candidate Name			Category/ Type	Amount of Each Disbursement this Period								
	Office Sought: House Disburse	ment For:		717	18086.40								
	Senate President	Primary Other (spe	General ecify) ▼		✗ Memo Item								
	State: District:	•			William Kelli								
_	Full Name (Last, First, Middle Initial)												
В.	American Airlines				Date of Disbursement								
	Mailing Address 1101 17th NW #600				10 19 2022								
	City	State	Zip Code		FEC Identification Number								
	Washington	DC	20036										
	Purpose of Disbursement Travel / Airfare			· · ·	C								
	Candidate Name			Cotogrami	Transaction ID: SB21B.44170								
				Category/ Type	Amount of Each Disbursement this Period								
	Office Sought: House Disburse	ment For:			708.70								
	Senate	Primary	General										
	State: President State:	Other (spe	ecify)		✗ Memo Item								
_	Full Name (Last, First, Middle Initial)												
C.	Chick-fil-a				Date of Disbursement								
					M M / D D / Y Y Y Y								
	Mailing Address 5200 Buffington Rd.				10 19 2022								
	City	State	Zip Code		FEC Identification Number								
	Atlanta	GA	30349										
	Purpose of Disbursement Food/Beverage				Transaction ID : SB21B.4417(
	Candidate Name			Category/ Type	Amount of Each Disbursement this Period								
	Office Sought: House Disburse	ment For:		717	24.73								
	Senate	Primary	General										
	President	Other (spe	ecify) 🔻		X Memo Item								
_	State: District:												
١,	ILIPTOTAL of Dichurcoments This Boss (entianal)				0.00								
\vdash	SUBTOTAL of Disbursements This Page (optional).			·····									
۱,	OTAL This Period (last page this line number only	n)											

S	CHEDULE B (FEC Form 3X)		INE NUMBER: PAGE 24 OF 182											
IT	EMIZED DISBURSEMENTS	Use sepa	_ ′	only one)										
			Summary Page	x		22	23			26	27			
_					28a	28b	28			29	30b			
	ny information copied from such Reports and States for commercial purposes, other than using the nar													
\setminus	NAME OF COMMITTEE (In Full)													
	WOMEN SPEAK OUT PAC													
_	Full Name (Last, First, Middle Initial)													
Α.	Cubesmart					Date o		ırser			Y	Y		
	Mailing Address 2101 Rock Spgs					10	J L	19	}	L	2022			
	,	State	Zip Code			FEC Identification Number								
	Las Vegas	NV	89128								-			
	Purpose of Disbursement Storage					C								
	Candidate Name				_					-	3.44170			
	Candidate Name			Catego Type		Amoun	t of Ea	ch I	Disb	ursem	ent this F	eriod		
	Office Sought: House Disburse	ment For:		туре							273.5	6		
	Senate	Primary	General					7	765					
	President	Other (spe	cify) 🔻	★ Me	mo Ite	m								
	State: District:	'					,,,,,							
_	Full Name (Last, First, Middle Initial)													
В.	Gsuite					Date o	f Disbu	risbursement						
	Mailing Address 1600 Amphithactes Darlayey					10 19 2022								
	Mailing Address 1600 Amphitheatre Parkway		2022											
	,	State	Zip Code	FEC Id	entifica	tion	Nu	mber						
	Mountainview Purpose of Disbursement	CA	94043					÷		-	-			
	Software Subscription				П.	C								
	Candidate Name			Catego	ory/					-	3.44170 ent this F	Period		
				Type		7 tillouri	t or Lu	.011	5100	diodili	one uno r	onou		
	Office Sought: House Disburse	ment For:									1456.0	2		
	Senate	Primary	General				,							
	President State: District:	Other (spe	cify)			X Me	mo Ite	m						
_	Full Name (Last, First, Middle Initial)									—				
C.	Hampton Inn					Date o	f Disbu	ırseı	ment	t				
	Mailing Address 250 North Andrews Ave					10	/	19	_	/ Y	2022	Y		
	City	State	Zip Code											
	Fort Lauderdale	FL	33301			FEC Id	entifica	tion	Nu	mber				
	Purpose of Disbursement				=	С								
	Travel / Lodging				_	Transaction ID : SB21B.4417(
	Candidate Name			Catego		Amoun	t of Ea	ch I	Disb	ursem	ent this F	eriod		
	Office Sought: House Disburse	ment For:	523.35											
	Senate Disburse	Primary	General				-	-	-	7	020.0			
	President	Other (spe				V								
	State: District:	- (-100	,, ·			X M∈	mo Ite	m						
Г							-	-	=	_		-		
s	SUBTOTAL of Disbursements This Page (optional)				▶		1 75			7	0.0	00		
\vdash								7	7					
ĺΤ	OTAL This Period (last page this line number only	·)			🕟					_	_			

SCHEDULE B (FEC Form 3X)			FOR LI	INE NUMBER: PAGE 25 OF 182									
ITEMIZED DISBURSEMENTS		parate schedule(s) h category of the	(CITCCIT	only one)									
		d Summary Page		1b 22 8a 28b	23 28c	26 27	:7 :0b						
Annintermentian control from such Demants and Ch													
Any information copied from such Reports and State or for commercial purposes, other than using the													
NAME OF COMMITTEE (In Full)													
WOMEN SPEAK OUT PAC													
Full Name (Last, First, Middle Initial)				Data	of Diaboura								
A. Home 2 Suites				Date	of Disburse		Y						
Mailing Address 5800 Peachtree Industrial				10	1	9 2022	2						
City	State	Zip Code		FEC I	FEC Identification Number								
Norcross	GA	30071					7						
Purpose of Disbursement Travel / Lodging													
Candidate Name						ID : SB21B.4417	-						
04.034.0			Category/ Type	Amoui	nt of Each	Disbursement th	iis Period						
Office Sought: House Disbur	sement For:		-74-5	- [3715	59.78						
Senate	Primary	General			7	7	45						
President State: District:	Other (sp	pecify) ▼		X M	emo Item								
Full Name (Last, First, Middle Initial)				+-									
B. Honey Baked Ham Co				Date	of Disburse	ement							
Honey baked Hain Go				M = N	M M / D D / Y Y Y Y								
Mailing Address 3875 Mansell Rd,				10	7 1 1 1 1 1 1								
City	State	Zip Code		FEC I	dentificatio	n Number							
Alpharetta Purpose of Disbursement	GA	30022					7						
Food/Beverage				C									
Candidate Name			Catagony			ID: SB21B.4417 Disbursement th	-						
			Category/ Type	Amour	il OI Eacii	Disbursement th	iis Fellou						
Office Sought: House Disbur	sement For:	1		∃ I .		92	24.39						
Senate	Primary	General			, , , , ,	,							
President State: District:	Other (sp	ecify)		X M	emo Item								
Full Name (Last, First, Middle Initial)													
C. Hotels.com				Date of	of Disburse		V V						
Mailing Address 2401 Wilson Blvd				10		9 2022							
City	State	Zip Code		EEC I	dentificatio	n Number							
Arlington	VA	22201			acrimoano	II INGIIIDEI	_						
Purpose of Disbursement Travel					بب								
Candidate Name			Category/	Transaction ID : SB21B.4417(Amount of Each Disbursement this Period									
Office Sought: House Disbur	sement For:		Type	206.30									
Senate	Primary	General											
President	Other (sp	pecify) 🔻		X M	emo Item								
State: District:				IVI	Cilio Itelli								
SUBTOTAL of Disbursements This Page (optional	d)				1 45	1 40 -	0.00						
\$ (April 1)	•			- =									
TOTAL This Period (last page this line number of	nlv)												

SCHEDULE B (FEC Form 3X)			INE NUMBER: PAGE 26 OF 182										
ITEMIZED DISBURSEMENTS		parate schedule(s) h category of the	•	only one)									
		d Summary Page	X	21b 28a	22 28b	23 28c	29		27 30b				
Any information conied from such Deposits and Ota													
Any information copied from such Reports and Sta or for commercial purposes, other than using the n													
NAME OF COMMITTEE (In Full)													
WOMEN SPEAK OUT PAC													
Full Name (Last, First, Middle Initial)													
A. i360					Date of Disbursement								
Mailing Address P.O. Box 37046					10		19		022				
City	State	Zip Code			FEC Identification Number								
Baltimore	MD	21297-3046			_				-				
Purpose of Disbursement Data Subscription				С									
Candidate Name			0.4			ansaction t of Each	_		_	riad			
			Category Type	"	Amoun	l oi Eaci	Disbui	semen	t triis Pe	riou			
Office Sought: House Disburs	sement For:	l			l .	1 46			9223.97				
Senate	Primary	General				,	,						
President State: District:	Other (sp	pecity) \blacktriangledown			X Me	mo Item							
Full Name (Last, First, Middle Initial)													
B. Jason's Deli					Date of	f Disburs	ement						
					M M / D D / Y Y Y Y Y								
Mailing Address 112 Gateway St			10 19 2022										
City Beaumont	State	Zip Code 77701		FEC Id	entification	on Numb	ber						
Purpose of Disbursement	177	17701		_	С				_				
Food/Beverage				ш		nsactio	ID · SE	321R <i>4</i>	4170				
Candidate Name			Category	//		t of Each	_		_	riod			
Office Sought: House Disburs	amont For		Type						351.09	П			
Senate Disputs	Primary	General				-			331.03	ш.			
President	Other (sp				X Me								
State: District:					NIE	mo Item							
Full Name (Last, First, Middle Initial)													
C. Qdoba Mexican Eats						f Disburs				_			
Mailing Address 920 West Paradise Drive					10		19		022	_			
City	State	Zip Code			EEC 14	entification	an Numb	her					
West Bend	WI	53095					ZII INUIIII		-				
Purpose of Disbursement Food/Beverage				7	Transaction ID : SB21B.4417(
Candidate Name			//	Amount of Each Disbursement this Period									
Office Sought: House Disburs	sement For:		\dashv	1042.90									
Senate	Primary	General											
President	Other (sp	pecify) ▼			X Me	mo Item							
State: District:					I IVIC	THE ILETT							
	_ _								0.00				
SUBTOTAL of Disbursements This Page (optional)			<u> </u>	1			,	0.00	_			
TOTAL This Period (last page this line number or	lv)						_	_		.			

SCHEDULE B (FEC Form 3X)			FOR LINE	INE NUMBER: PAGE 27 OF 182								
ITEMIZED DISBURSEMENTS		parate schedule(s) h category of the	(check onl	· _ ·								
		d Summary Page	X 21b 28a	22 28b	23 28c	26	27 30b					
Any information popular from such Departs and Oto	<u> </u>											
Any information copied from such Reports and Sta or for commercial purposes, other than using the r								i				
NAME OF COMMITTEE (In Full)												
WOMEN SPEAK OUT PAC												
Full Name (Last, First, Middle Initial)				Data of F	N:-1							
A. Residence Inn				Date of D	/ D		YYYY					
Mailing Address 10400 Fernwood Road				10	19		2022					
City	State	Zip Code		FEC Identification Number								
Bethesda Purpose of Disbursement	MD	20817										
Travel / Lodging				C								
Candidate Name						D : SB21E	-					
			Category/ Type	Amount	of Each I	Disbursem	ent this Perio	a				
Office Sought: House Disbur	sement For:		1,712	1 ' '			2134.08					
Senate	Primary	General					- 46					
President	Other (sp	pecify) ▼		★ Mem	o Item							
State: District:												
Full Name (Last, First, Middle Initial)				D	S. 1							
B. Sams Club				Date of I								
Mailing Address 2101 SE Simple Savings Drive				10 19 2022								
Cit.	Otata	Zin Codo										
City Bentonville	State AZ	Zip Code 72716		FEC Ider	ntification	Number						
Purpose of Disbursement		72710		С								
Food/Beverage					saction I	D : SB21E	R 44170					
Candidate Name			Category/			_	ent this Perio	d				
000			Туре				704.70	т.				
	sement For:	Conoral			7		721.73					
Senate President	Other (sp	General										
State: District:	0.1.01 (0)	,,,,,		X Mem	o Item							
Full Name (Last, First, Middle Initial)												
C. Southwest Airlines				Date of I			YYYY					
Mailing Address 2702 Love Field Dr				10	19		2022					
City	State	Zip Code		FF0 ::	ALC: 11	Ni						
Dallas	TX	75235		FEC Ider	illication	number						
Purpose of Disbursement Travel / Airfare			· · · ·	C								
Candidate Name			Category/ Type	Transaction ID : SB21B.4417(Amount of Each Disbursement this Period								
Office Sought: House Disbur	sement For:		1,700	20719.36								
Senate	Primary	General			7	-	- 46	-				
President	Other (sp	pecify) ▼		X Mem	o Item							
State: District:					- 1.0111							
SUBTOTAL of Disbursements This Page (optiona							0.00	Ī				
CODIOTAL OF DISDUISEMENTS THIS Page (Optional	'/		·····		7	-	46	=				
TOTAL This Period (last page this line number or	nlv)											

ľ

SCHEDULE B (FEC Form 3X)	Use sepa	arate schedule(s)	FOR LINE (check only	NE NUMBER: PAGE 28 OF 182								
TEMIZED DISBURSEMENTS	for each	category of the Summary Page	21b 28a	22 23 26 27 28b 28c 29 30b								
Any information copied from such Reports and Sta or for commercial purposes, other than using the n												
NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC												
Full Name (Last, First, Middle Initial) 4. Uber				Date of Disbursement								
Mailing Address 1455 Market St #400				10 19 2022								
City San Francisco	State CA	Zip Code 94103		FEC Identification Number								
Purpose of Disbursement Travel Candidate Name		[Transaction ID : SB21B.44170								
	sement For:		Category/ Type	Amount of Each Disbursement this Period 153.87								
Senate President	Primary Other (spe	General cify) ▼		★ Memo Item								
State: District:												
Full Name (Last, First, Middle Initial) 3. United Airlines				Date of Disbursement								
Mailing Address 609 Main Street				10 19 2022								
City Houston	State TX	Zip Code 77002		FEC Identification Number								
Purpose of Disbursement Travel / Airfare				Transaction ID : SB21B.44170								
Candidate Name			Category/ Type	Amount of Each Disbursement this Period								
Office Sought: House Senate President State: Disburs	Primary Other (spe	General cify)		388.60 X Memo Item								
Full Name (Last, First, Middle Initial) - Anedot, Inc				Date of Disbursement								
Mailing Address 1340 Poydras Street Suite 1770				10 19 2022								
City New Orleans	State LA	Zip Code 70112		FEC Identification Number								
Purpose of Disbursement Credit Card Processing Fees Candidate Name		[Category/ Type	Transaction ID: SB21B.44792 Amount of Each Disbursement this Period								
Senate	Primary Other (spe	General	- 71	1530.47								
President		City)		Memo Item								

SCHEDULE B (FEC Form 3X)	T	INE N	INE NUMBER: PAGE 29 OF 182											
ITEMIZED DISBURSEMENTS	Use sep for each		only one)											
		Summary Page	×	21b 28a	22 28b	23			26 29	27 30b				
Any information period from such Departs and Chate														
Any information copied from such Reports and State or for commercial purposes, other than using the nar														
NAME OF COMMITTEE (In Full)														
WOMEN SPEAK OUT PAC														
Full Name (Last, First, Middle Initial)					Data a	5 Diah		4						
A. Another Broken Egg					Date of			D /		YYY	Υ			
Mailing Address 5955 T.G. Lee Blvd. Suite 100		I			10		18	_	느	2022				
City Orlando	State FL	Zip Code 32822			FEC Identification Number									
Purpose of Disbursement		32022			С		Т							
Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Co	ard Purchas	se)					٠,	-	2045	11500				
Candidate Name			Categor	v/		nsaction to the contraction of t				5 .44500 ent this F	Period			
			Type	,	-				-					
	ment For:									4.0	5			
Senate	Primary	General												
State: District:	Other (spe	ecity) 🔻			≭ Me	mo Iter	n							
Full Name (Last, First, Middle Initial)														
B. Another Broken Egg					Date of	f Disbui	rser	nent						
					M = M / D = D / Y = Y = Y									
Mailing Address 5955 T.G. Lee Blvd. Suite 100			10 19 2022											
City	State	Zip Code			FEC Id	entificat	tion	Nun	nber					
Orlando Purpose of Disbursement	FL	32822					÷	-						
Food/Beverage (9/16/22 Usio Inc. Prepaid Debit C	ard Purchas	se)	· · ·		C		-	-						
Candidate Name			Categor	v/		nsaction				.44501 ent this F	Period			
			Type	,	7 11110 411	. o		31000		JIIC (1110 1	01100			
Office Sought: House Disburse	ment For:								7	50.2	.9			
Senate	Primary	General												
President State: District:	Other (spe	ecity)			X Me	mo Iter	n							
Full Name (Last, First, Middle Initial)														
C. Ashley, Michelle, , ,					Date of	_	rser			YYY	V			
Mailing Address 2800 Shirlington Rd, Ste 1200					10		13	_	L	2022				
City	State	Zip Code			FEC Id	entificat	tion	Nun	nher					
Arlington	VA	22206						. vui						
Purpose of Disbursement Travel / Food/Beverage / Printing / Postage					Transaction ID : SB21B.44142									
Candidate Name			y/	Amount of Each Disbursement this Period										
Office Sought: House Disburse	ment For:		552.07											
Senate	Primary	General							,					
President	Other (spe	ecify) 🔻			Me	mo Iter	n							
State: District:					_									
SUBTOTAL of Disbursements This Page (optional)				•			I			552.0	07			
											-			

S	CHEDULE B (FEC Form 3X)		INE NUMBER: PAGE 30 OF 182											
IT	EMIZED DISBURSEMENTS	Use sep for each	only one)											
			Summary Page		21b			23 28c		26 29	27 30b			
Γ.	Ctate		mat ha sald an us											
	ny information copied from such Reports and State for commercial purposes, other than using the nar													
\setminus	NAME OF COMMITTEE (In Full)													
	WOMEN SPEAK OUT PAC													
	Full Name (Last, First, Middle Initial)					Data	-4 D:-							
Α.	Staples					Date of Disbursement								
	Mailing Address 500 Staples Dr					10 13 2022								
	,	State	Zip Code			FEC Identification Number								
	Framingham	MA	01702						_		-			
	Purpose of Disbursement USB Storage					C								
	Candidate Name				-						.44142			
				Categ Typ		Amoui	nt of	∟acn	DISDU	ırseme	ent this Pe	eriod		
	Office Sought: House Disburse	ment For:				11:	Ϊ.	_			14.96	;		
	Senate	Primary	General					,		,				
	State: District:	Other (spe	ecify) 🔻			X M	emo	Item						
_	State: District: Full Name (Last, First, Middle Initial)					+								
В.	Staples					Date of	of Dis	burse	ment					
	Ctaples					M M / D D / Y Y Y Y								
	Mailing Address 500 Staples Dr			10 13 2022										
	City	State	Zip Code	FEC I	dentif	ication	ı Nur	nber						
	Framingham Purpose of Disbursement	MA	01702				-		_		-			
	Printing				П	C	_							
	Candidate Name			Categ	iory/						.44142 ent this Pe	eriod		
				Тур		7								
		ment For:] L.		,			182.41			
	Senate	Primary	General											
	President State: District:	Other (spe	ecity)			✗ Memo Item								
_	Full Name (Last, First, Middle Initial)													
C.	Hilton Harrisburg					Date of					YYY	V		
	Mailing Address 1 North 2nd Street					10	,	13		L	2022			
	City	State	Zip Code			FEC I	dentif	ication	Nive	mbor				
	Harrisburg	PA	17101				uenilli	ication	ı ıvul	inei	-			
	Purpose of Disbursement Travel				П	C		-41	15	CDOAF	4444			
	Candidate Name			Transaction ID : SB21B.44142 Amount of Each Disbursement this Period										
	Office Sought: House Disburse	ment For:	238.13											
	Senate	Primary	General					7	_	7	- 46			
	President	Other (spe	ecify) 🔻			X M	emo	ltem						
	State: District:	-					2.110	.,						
5	SUBTOTAL of Disbursements This Page (optional)				···· >			T .		75	0.00	0		
L								-				可		
1 1	TOTAL This Period (last page this line number only	/)					_	_		_				

	EDULE B (FEC Form 3X) MIZED DISBURSEMENTS		urate schedule(s)	1 -		LINE I	NUMBEF one)	R:			PAGE	31 (OF 182
I LIV	IIZED DISBONSEMIENTS		category of the Summary Page	`		21b			23	26		27	
						28a	28b		28c	29		30b	
	nformation copied from such Reports and State commercial purposes, other than using the na												
\	ME OF COMMITTEE (In Full) OMEN SPEAK OUT PAC												
4. St	I Name (Last, First, Middle Initial) taples						M	of Di	sburse	D /		Y Y	Y
ivia —	iling Address 500 Staples Dr		1				10	_	1;	3	<u> </u>	2022	
	y amingham rpose of Disbursement	State MA	Zip Code 01702				FEC	denti	fication	Numl	oer		
Er	ndidate Name		[Cate	_	ry/	Tr			_		.44142 ent this	Period
Off	ice Sought: House Disburse Senate President	ment For: Primary Other (spec	General	ТУ	/pe		X M	emo	Item			28.1	11
Sta		'											
3. A	I Name (Last, First, Middle Initial) tlanta Dairies iling Address 777 Memorial Dr SE						Date of	of Di	sburse	D /	Y	y y 2022	Y
	y anta rpose of Disbursement	State GA	Zip Code 30316					denti	fication	n Numl	ber	_	
F	pood/Beverage (9/16/22 Usio Inc. Prepaid Debit C ndidate Name	ard Purchase	9)	Cate	egor /pe	y/				_		.44503 ent this	Period
	Senate President	ment For: Primary Other (spec	General				X M	emo	Item			14.4	19
Sta													
_	I Name (Last, First, Middle Initial) ackbaud						Date of	_	sburse		Υ	ΥΥΥ	Y
Ма	iling Address 65 Fairchild Street						10	_	19	9	L.	2022	
	arleston	State SC	Zip Code 29492					denti	fication	n Numb	ber		
Cı	rpose of Disbursement redi Card Processing Fees ndidate Name		[2	Ξ							3.44793	Doriod
Off		ment For:		Cate Ty	egor /pe	'y/	Amou	it oi	Each	DISDUIT	seme	ent this I	
Sta	Senate President District:	Primary Other (spec	General cify) ▼				M	emo	Item				
SUB	TOTAL of Disbursements This Page (optional).					•			T.		=	0.	96
TOT	AL This Period (last page this line number only	·)				_							

21	CHEDITIE D. (EEC Earm 2V)				
	CHEDULE B (FEC Form 3X)	llse sena	rate schedule(s)	FOR LINE	
T	EMIZED DISBURSEMENTS	for each of	category of the	(check only	/ one)
		Detailed S	Summary Page	28a	28b 28c 29 30b
Ar	ny information copied from such Reports and Stater	nents may n	not be sold or use	ed by any pers	on for the purpose of soliciting contributions
	for commercial purposes, other than using the nan				
\setminus	NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC				
	Full Name (Last, First, Middle Initial)				
۹.	Bojangles				Date of Disbursement
	Mailing Address 9432 Southern Pine Blvd				10 08 2022
	,	State NC	Zip Code		FEC Identification Number
	Charlotte Purpose of Disbursement	INC	28273		
	Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	ard Purchase)		C
	Candidate Name			Category/	Transaction ID : SB21B.44505 Amount of Each Disbursement this Period
				Type	Attributed East Biodersonicity and Forted
	Office Sought: House Disburser	ment For:			60.00
	Senate	Primary	General		
	State: District:	Other (spec	iry) 🔻		✗ Memo Item
	Full Name (Last, First, Middle Initial)				
3.	Bourbon Street Gril				Date of Disbursement
					M = M / D = D / Y = Y = Y
	Mailing Address 110 E Commonwealth Ave				10 18 2022
	,	State	Zip Code		FEC Identification Number
	Fullerton Purpose of Disbursement	CA	92832		
	Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	ard Purchase	e)		C
	Candidate Name			Category/	Transaction ID : SB21B.44507 Amount of Each Disbursement this Period
				Type	
	Office Sought: House Disburser				45.87
	Senate President	Primary Other (spec	General		
	State: District:	Other (spec	iiy)		Memo Item
	Full Name (Last, First, Middle Initial)				
С.	BP				Date of Disbursement
					M M / D D / Y Y Y Y
	Mailing Address 501 Westlake Park Blvd				10 06 2022
	City	State	Zip Code		FFC Identification Number
	Houston	TX	77079		FEC Identification Number
	Purpose of Disbursement Travel (9/16/22 Usio Inc. Prepaid Debit Card Purcha	ase)			
	Candidate Name				Transaction ID : SB21B.44509
	Canadate Hame			Category/ Type	Amount of Each Disbursement this Period
	Office Sought: House Disburser	ment For:		71: -	25.00
	Senate	Primary	General		
	President	Other (spec	eify) ▼		X Memo Item
	State: District:				
S	SUBTOTAL of Disbursements This Page (optional)			······	0.00
_	OTAL This Period (last page this line number only))			
- 1	TIME THIS I CHOO (IASE PAGE THIS HITE HUTTING OTHY)	,			

17

SCHEDULE B (FEC Form 3X)	Hee com	wata ach selele ()	INE NUMBER: PAGE 33 OF 182										
ITEMIZED DISBURSEMENTS	Use sepa for each of	only one)		00 [, ₋	707						
		Summary Page	25	1b 22 3a 28b	, -	23 28c	26		27 30b				
Any information conind from such Banarta and States	l nonte mou n	not he cold or we								ione			
Any information copied from such Reports and Staten or for commercial purposes, other than using the nam													
NAME OF COMMITTEE (In Full)													
WOMEN SPEAK OUT PAC													
Full Name (Last, First, Middle Initial)				Data	-4 D:-								
A. BP						bursen	_						
Mailing Address 501 Westlake Park Blvd				10		08			2022	Y			
City	State	Zip Code		FEC	Identif	ication	Numi	ner					
Houston	TX	77079			idonii.ii	loation	1101112	JO1	-				
Purpose of Disbursement Travel (9/16/22 Usio Inc. Prepaid Debit Card Purcha	ase)												
Candidate Name			0-1/			ction I	_) oriod			
			Category/ Type	Amou	int of	Each L	JISDUR	seme	nt this P	eriod			
Office Sought: House Disbursen	nent For:	I		$\exists \mid \cdot \mid$					71.32	2			
Senate	Primary	General				7							
President	Other (spec	cify) 🔻		X N	1emo	Item							
State: District:													
Full Name (Last, First, Middle Initial) B. BP				Date	of Dis	bursen	nent						
BF				M	_	D = 0	_	Υ	Y	Y			
Mailing Address 501 Westlake Park Blvd			_	10 08 2022									
City	State	Zip Code	FFC	Identif	ication	Numb	oer						
Houston Purpose of Disbursement	TX	77079											
Travel (9/16/22 Usio Inc. Prepaid Debit Card Purcha	ase)												
Candidate Name			Category/ Type			ction II Each D	_		44511 nt this P	'eriod			
Office Sought: House Disbursen	nent For:		71	- [-				108.1	7			
	Primary	General				,							
	Other (spec	cify)		X N	1emo	Item							
State: District:													
Full Name (Last, First, Middle Initial) C. BP				Date	of Dis	bursen	nent						
e. PL				M		D C	_	Υ	YY	Y			
Mailing Address 501 Westlake Park Blvd				10		08			2022				
,	State	Zip Code		FEC	Identif	ication	Numt	oer					
Houston Purpose of Disbursement	TX	77079			_	_		-					
Travel (9/16/22 Usio Inc. Prepaid Debit Card Purcha	ase)								115:				
Candidate Name			Category/ Type			ction I Each D			44512 nt this P	'eriod			
Office Sought: House Disbursen	nent For:		71	15.00									
Senate	Primary	General											
President	Other (spec	cify) 🔻		X	✗ Memo Item								
State: District:													
SUBTOTAL of Disbursements This Page (optional)			······································						0.0	0			
TOTAL This Period (last page this line number only)													

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS			Use separate schedule(s) for each category of the			FOR LINE NUMBER: PAGE 34 OF 182							
						one)	23						
		Detailed Summary Page			22 28b		26 27 29 30b						
A information conical f	om such Reports and Sta	<u> </u>			28a		28c						
	es, other than using the r												
NAME OF COMMITT	, ,												
WOMEN SPE	AK OUT PAC												
Full Name (Last, First	, Middle Initial)					D-t-	f Distance						
A. BP							Date of Disbursement						
Mailing Address 501 \	Vestlake Park Blvd					10		08		2022			
City		State	•				entification	on Numb	ber				
Houston		TX	X 77079										
Purpose of Disbursem Travel (9/16/22 Usio	nent nc. Prepaid Debit Card Pur	chase)				C							
Candidate Name	<u> </u>					Transaction ID : SB21B.44513							
		Category/ Type				Amount of Each Disbursement this Period							
Office Sought:	Office Sought: House Disburs			ment For:				8.14					
	Primary	General											
Ctata	President	Other (sp	ecify) ▼			★ Memo Item							
	trict:					_							
Full Name (Last, First B. BP	, Middle Initial)					Date o	f Disburs	ement					
D. DP							M M / D D / Y Y Y Y						
Mailing Address 501	Westlake Park Blvd					10		14		2022	_		
City		State	Zip Code			FEC Id	entification	on Numb	ber				
Houston TX 77079 Purpose of Disbursement													
•	nc. Prepaid Debit Card Pu	rchase)		Г.		С							
Candidate Name Category/						Transaction ID: SB21B.44514 Amount of Each Disbursement this Period							
				Type	y,	Amoun	t of Laci	Disbuit	Scilicii	1 1113 1 0	Tiou		
Office Sought:	sement For:				50.43								
	Primary												
State: Dis	President Other (specify) ate: District:						X Memo Item						
Full Name (Last, First													
c. Brusters Real	•					Date o	f Disburs	ement					
Mailing Address 730 I	Mulberry St					10		09		2022			
City		State	Zip Code			FF0 / :							
Borough of Bridgewate	Borough of Bridgewater PA 15009						FEC Identification Number						
Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase)						C Transaction ID : SB21B.44516							
Candidate Name				Catego	ry/					t this Pe	riod		
Office Sought: House Disbursement For:										90.77			
	Senate	Primary	General				-						
President Other (specify) ▼						X Memo Item							
State: Dis	trict:												
CURTOTAL - (C)	manta This Deep (1)								0.00			
SUBTUTAL OF DISDUISE	ments This Page (optiona	1)			<u> </u>	-				3.50	#		
TOTAL This Period (las	t page this line number or	nlv)							_		_		

17

SCHEDULE B (FEC Form 3X)	I le s		FOR LINE	NUMBER:	PAGE	35 OF 182				
ITEMIZED DISBURSEMENTS		rate schedule(s) category of the	(check onl			07				
	Detailed S	Summary Page	X 21b 28a	22 28b	23 28c	26 27 29 30b				
Any information copied from such Departs and Statem	onte mov s	not be sold or we								
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam										
NAME OF COMMITTEE (In Full)										
WOMEN SPEAK OUT PAC										
Full Name (Last, First, Middle Initial)				Data of D	: - l					
A. Campaign HQ	Date of Disbursement									
Mailing Address 109 West Front Street					10 07 2022					
City	state	Zip Code		FEC Ident	ification Nu	ımher				
Brooklyn	IA	52211		FEC Identification Number						
Purpose of Disbursement Donor Call Minutes Fee				C						
Candidate Name			0-1			SB21B.44				
			Category/ Type	Amount of Each Disbursement this Period						
Office Sought: House Disbursem				56.35						
	Primary	General								
	Other (spec	cify) 🔻		Memo Item						
State: District: Full Name (Last, First, Middle Initial)										
B. Campaign HQ				Date of D	isbursemer	nt				
Campaign no	M M / D D / Y Y Y									
Mailing Address 109 West Front Street				10	07	20	22			
,	state	Zip Code		FEC Ident	ification Nu	umber				
Brooklyn IA 52211 Purpose of Disbursement										
Donor Call Setup Fee		C								
Candidate Name	Transaction ID : SB21B.44491 Amount of Each Disbursement this Period									
			Category/ Type							
Office Sought: House Disbursem	nent For: Primary General Other (specify)					28	880.00			
State: District:	Other (spec	, ii y)		Memo Item						
Full Name (Last, First, Middle Initial)										
C. Campbell, Catherine, , ,				Date of D	isbursemer	nt				
	M M / D D / Y Y Y Y									
Mailing Address 2800 Shirlington Road Ste 1200				10	13	202	22			
	state	Zip Code		FF0.11	· · · · · · · · · · · · · · · · · · ·					
Arlington	VA	22206		FEC Ident	ification Nu	umber	_			
Purpose of Disbursement Food/Beverage										
Candidate Name			SB21B.43							
Candidate Name			Category/ Type	Amount of	Each Dist	oursement	this Period			
Office Sought: House Disbursem				1			196.96			
				7 7						
President		Memo Item								
State: District:										
						2	133 31			
SUBTOTAL of Disbursements This Page (optional)			·····•		7	7	3133.31			
TOTAL This Period (last page this line number only).										

SCHEDULE B (FEC Form 3X)	llee sens	erate schedule(s)	FOR LINE NUMBER: PAGE 36						
TEMIZED DISBURSEMENTS	101 each category of the 1 2				23 26 27				
	Detailed	Summary Page	28a		28c 29 30b				
Any information copied from such Reports and Stater									
or for commercial purposes, other than using the nar	ne and addr	ress of any politica	il committee to	solicit contribu	itions from such committee.				
WOMEN SPEAK OUT PAC									
Full Name (Last, First, Middle Initial)				Data of Dial	ouroamant				
A. Cantrall, Maggie, , ,	Date of Disbursement								
Mailing Address 2800 Shirlington Road Suite 1200				10	03 2022				
City Arlington	State VA	Zip Code 22206		FEC Identification Number					
Purpose of Disbursement	se of Disbursement								
Travel / Food/Beverage (All Below Threshold) Candidate Name		C	ction ID : SB21B.43933						
Candidate Name			Category/ Type	Amount of Each Disbursement this Period					
Office Sought: House Disburser	ment For:		.,,,,		200.42				
Senate President	Primary	General							
State: District:	Other (spec	city) 🔻		Memo I	tem				
Full Name (Last, First, Middle Initial)									
3. Caporaletti, Erica, , ,		Date of Disbursement							
Mailing Address 2800 Shirlington Road, Suite 1200	10 03 2022								
	State	Zip Code							
City Arlington		FEC Identification Number							
Purpose of Disbursement Travel / Food/Beverage / Shipping (Below Thresho									
Candidate Name	Transaction ID : SB21B.43798								
	Amount of E	Each Disbursement this Period							
	ment For: Primary				296.94				
Senate President		П							
State: District:	Other (spec	,,		Memo I	tem				
Full Name (Last, First, Middle Initial)				D . (D: 1					
Caporaletti, Erica, , ,	Date of Disbursement M								
Mailing Address 2800 Shirlington Road, Suite 1200									
,	State	Zip Code		FEC Identific	cation Number				
Arlington Purpose of Disbursement	VA	22206		C					
Travel	Transaction ID : SB21B.44089								
Candidate Name			Category/ Type	Amount of E	Each Disbursement this Period				
Office Sought: House Disburser	ment For:		i ype		159.44				
Senate	Primary	,							
State: President State:	Other (spec	∪iiy) ▼		Memo I	tem				
					656.80				
SUBTOTAL of Disbursements This Page (optional)			<u> </u>		030.80				
TOTAL This Period (last page this line number only))			1					

	CHEDULE B (FEC Form 3X) EMIZED DISBURSEMENTS	Use sepa	rate schedule(s)			LINE I	NUMBI	R:				PA	GE	37	OF	182
•	EMIZED DISBURSEMENTS		category of the Summary Page	"	X	21b	22		23			26		27		
		Detailed	Summary rage			28a	28	b	280	c		29		30	b	
	ny information copied from such Reports and Stater for commercial purposes, other than using the nar															
\rangle	NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC															
۹.	Full Name (Last, First, Middle Initial) Caporaletti, Erica, , , Mailing Address 2800 Shirlington Road, Suite 1200						M	of [Disbur		D			y ¶ y 2022	Y	1
	City	State	Zip Code					lala :	4:6: 4		NI.		_			
	Arlington	VA	22206				FEC	ider	ntificat	lon	i NL	ımbe	r			
	Purpose of Disbursement Travel / Mileage						С	Tran	sactio	on	ID :	SB2	1B.	.4408	9	
	Candidate Name			Cat T	egoi ype	γ/	Amo	unt c	of Eac	:h I	Disk	ourse	me	_	-	riod
	Office Sought: House Disburser Senate President	ment For: Primary Other (spec	General General					Mam	o Iten		_	7	_	13	3.00	_
	State: District:						X	vieiii	o iten	11						
3.	Full Name (Last, First, Middle Initial) Chevron						Date	of [Disbur				Y	Y Y	T Y	
	Mailing Address 6001 Bollinger Canyon Road						1	0	Ĺ	07	- 1	Ĺ		2022		
	San Ramon	State CA	Zip Code 94583					lder	ntificat	ion	Nι	ımbe	r	_		
	Purpose of Disbursement Travel (9/16/22 Usio Inc. Prepaid Debit Card Purch Candidate Name	nase)			Transaction ID : SB21B.44518 Amount of Each Disbursement this							-	riod			
	Office Sought: House Disburser Senate President	ment For: Primary Other (spec	General		ypo		X		- 11	_	_	7	_	36	6.83	
	State: District:							viem	o Iten	11						
С.	Full Name (Last, First, Middle Initial) Chevron						Date		Disbur	rser			V	Y		
	Mailing Address 6001 Bollinger Canyon Road							0		07	- 1	Ĺ		2022		
	,	State	Zip Code				FEC	Ider	ntificat	ion	·Νι	ımbe	r			
	San Ramon Purpose of Disbursement	CA	94583							_			_	-	1	
	Travel (9/16/22 Usio Inc. Prepaid Debit Card Purch Candidate Name	ase)		-	_				saction			-			-	اد ماد
				Cat T	egoi ype	<i>'</i> y/	Amo	unt c	of Eac	n i	DISK	ourse	me	-	-	riod
	Office Sought: House Disburser Senate President	ment For: Primary Other (spec	General General				X	Mem	o Iten	n		7	_	3:	5.00	_
	State: District:						Ш	710111	J 11011							
	SUBTOTAL of Disbursements This Page (optional)					>	F	=	-	÷	=	-	=	=	0.00	4
Т	OTAL This Period (last page this line number only))							_	_		_	_		_	. 1

SCHEDULE B (FEC Form 3X) TEMIZED DISBURSEMENTS	Use separate sched	dule(s)	FOR LINE I		I	PAGE 38 OF	182
TEMIZED DIODONOLIMENTO	for each category of Detailed Summary		21b 28a	22 28b	23 26 28c 29		
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam							
NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC		, poou c					·-
Full Name (Last, First, Middle Initial) - Chevron				Date of Di	sbursement	Y	_
Mailing Address 6001 Bollinger Canyon Road				10	08	2022	
San Ramon	State Zip Code CA 94583	е			ification Numb	per	
Purpose of Disbursement Travel (9/16/22 Usio Inc. Prepaid Debit Card Purcha Candidate Name	ase)		atagan/		action ID : SE	321B.44520 sement this Pe	oriod
	Primary Ger	neral	ategory/ Type	Amount of	Lacii Disbuis	1.06	nou
State: District:	Other (specify) ▼			✗ Memo	Item		
Full Name (Last, First, Middle Initial) 3- Chevron Mailing Address 6001 Bollinger Canyon Road				Date of Di	sbursement 08	2022	1
City	State Zip Code	e			ification Numb		
San Ramon Purpose of Disbursement Travel (9/16/22 Usio Inc. Prepaid Debit Card Purcha	CA 94583 ase)			С			
Candidate Name		C	ategory/ Type		action ID : SE Each Disburs	321B.44521 sement this Pe	riod
President		neral		X Memo	Item	30.00	_
State: District: Full Name (Last, First, Middle Initial)					sbursement		
Chevron Mailing Address 6001 Bollinger Canyon Road				10	D D /	2022	1
City	State Zip Code	е		FEC Ident	ification Numb	per	_
San Ramon Purpose of Disbursement Travel (9/16/22 Usio Inc. Prepaid Debit Card Purcha	CA 94583 ase)			C	action ID : SE	321B 44523	
Candidate Name		С	ategory/ Type			sement this Pe	riod
		neral		X Memo	Item	79.90	_
SUBTOTAL of Disbursements This Page (optional)			······ >		75 1 1 2	0.00	
TOTAL This Period (last page this line number only).							\Box

21	CHEDITIE D /EEC Form 2V)				
	CHEDULE B (FEC Form 3X)	llee sena	rate schedule(s)	FOR LINE	
T	EMIZED DISBURSEMENTS		category of the	(check only	one)
		Detailed S	Summary Page	28a	28b 28c 29 30b
۸۰	ny information copied from such Reports and Stater	monto mov n	act he cold or up		
	for commercial purposes, other than using the nan				
\rangle	NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC				
_	Full Name (Last, First, Middle Initial)				Data of Dieleuropeant
٩.	Chevron				Date of Disbursement
	Mailing Address 6001 Bollinger Canyon Road				10 15 2022
	,	State	Zip Code		FEC Identification Number
	San Ramon	CA	94583		
	Purpose of Disbursement Travel (9/16/22 Usio Inc. Prepaid Debit Card Purch	ase)		· · · · ·	C
	Candidate Name			Category/	Transaction ID: SB21B.44523 Amount of Each Disbursement this Period
				Type	Amount of Each Bioducement and Ferica
	Office Sought: House Disburser				69.66
	Senate President	Primary	General		
	State: District:	Other (spec	aiy) ▼		✗ Memo Item
	Full Name (Last, First, Middle Initial)				
3.	Chevron				Date of Disbursement
	Mailing Address 6001 Bollinger Canyon Road				10 15 2022
	,	State	Zip Code		FEC Identification Number
	San Ramon Purpose of Disbursement	CA	94583		
	Travel (9/16/22 Usio Inc. Prepaid Debit Card Purch	nase)			C
	Candidate Name			Category/	Transaction ID: SB21B.44524 Amount of Each Disbursement this Period
				Type	Amount of Each Dispursement this Feriod
	Office Sought: House Disburser				65.92
	Senate President	Primary Other (spec	General		
	State: District:	Other (spec	ary)		X Memo Item
	Full Name (Last, First, Middle Initial)				
Э.	Chevron				Date of Disbursement
	Moiling Address Cook Ballianas Canara Band				10 15 2022
	Mailing Address 6001 Bollinger Canyon Road		10 13 2022		
	City	State	Zip Code		FEC Identification Number
	San Ramon Purpose of Disbursement	CA	94583		
	Travel (9/16/22 Usio Inc. Prepaid Debit Card Purcha	ase)		· · ·	C Specific ID CD24D 44504
	Candidate Name			Category/	Transaction ID: SB21B.4452! Amount of Each Disbursement this Period
	Office Sought: House Disburser	ment For:		Туре	71.60
	Senate	Primary	General		
	President	Other (spec	sify) ▼		✗ Memo Item
	State: District:				
S	SUBTOTAL of Disbursements This Page (optional)			·····	0.00
т	OTAL This Period (last page this line number only))			
-	(,			

Use separate schedule(s) to Check only one) Debutated Summary Rage Any information copied from such Reports and Statements may not be add or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) WOMEN SPEAK OUT PAC Full Name (Last, First, Middle Initial) A. Chevron Mailing Address 6001 Bollinger Carryon Road City San Ramon Purpose of Disbursement For: Candidate Name City San Ramon Mailing Address 6001 Bollinger Carryon Road City San Ramon Mailing Address 6001 Bollinger Carryon Road City San Ramon Mailing Address 6001 Bollinger Carryon Road City San Ramon City San Ramon Mailing Address 6001 Bollinger Carryon Road City San Ramon Mailing Address 6001 Bollinger Carryon Road City San Ramon Mailing Address 6001 Bollinger Carryon Road City San Ramon Mailing Address 6001 Bollinger Carryon Road City San Ramon City San Ramon Mailing Address 6001 Bollinger Carryon Road City San Ramon Prepadent Senate Prepadent Cardicate Name City San Ramon Category' Thyoe Citics Sought: Full Name (Last, First, Middle Initial) Cherron Mailing Address 6001 Bollinger Carryon Road City San Ramon City San Ramon Category' Thyoe City San Ramon Mailing Address 6001 Bollinger Carryon Road City San Ramon C		CHEDULE B (FEC Form 3X)	lles com	wata ash salisis ()			JMBER:			PAGE	= 40 O	F 182					
Detailed Summary Page 28a 28b 20 30b 3	IT	EMIZED DISBURSEMENTS			(Onlook)	-		¬ 00		۰c -							
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) WOMEN SPEAK OUT PAC Full Name (Last, First, Middle Initial) A. Chevron Mailing Address 6001 Bollinger Carryon Road City San Ramon City San Ramon City San Ramon City San Ramon City Senate Primary General Primary General Primary State: City San Ramon City										L							
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC Full Name (Last, First, Middle Initial) City San Ramon Address 6001 Bollinger Canyon Road City San Ramon Purpose of Disbursement Travel (814622 Uslo Inc. Prepaid Debit Card Purchase) Cardidate Name Category/ Type Transaction 10 : \$8218.44526 Amount of Each Disbursement this Period District Full Name (Last, First, Middle Initial) City San Ramon Mailing Address 6001 Bollinger Canyon Road City San Ramon City San Ramon City San Ramon City San Ramon City Category/ Travel (814622 Uslo Inc. Prepaid Debit Card Purchase) Cardidate Name Category/ Travel (814622 Uslo Inc. Prepaid Debit Card Purchase) Cardidate Name City San Ramon City San	Λ ν	w information conied from such Departs and Chaten	l nonte mou n	not ha sold or								ione					
Full Name (Last, First, Middle Initial) A. Chevron Mailing Address 6001 Boilinger Canyon Road City San Ramon Purpose of Disbursement Travel (19/16/22 Usio Inc. Prepaid Debit Card Purchase) Cardidate Name City San Ramon Mailing Address 6001 Boilinger Canyon Road City San Ramon Purpose of Disbursement Travel (19/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ San Ramon Mailing Address 6001 Boilinger Canyon Road City San Ramon Chevron Mailing Address 6001 Boilinger Canyon Road City San Ramon Mailing Address 6001 Boilinger Canyon Road City San Ramon City San Ramon Mailing Address 6001 Boilinger Canyon Road City San Ramon City San Ramon Mailing Address 6001 Boilinger Canyon Road City San Ramon City San Ramon Mailing Address 6001 Boilinger Canyon Road City Mailing Maili																	
A. Chevron Mailing Address 6001 Bollinger Canyon Road City San Ramon Candidate Name Cardidate Name Priesident State: District Full Name (Last, First, Middle Initial) Chevron Mailing Address 6001 Bollinger Canyon Road City San Ramon Condidate Name Cardidate Name Condidate		NAME OF COMMITTEE (In Full)															
A. Chevron Mailing Address 6001 Bollinger Canyon Road City San Ramon Prupose of Disbursement Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name President State: District: Full Name (Last, First, Middle Initial) C. Chevron Mailing Address 6001 Bollinger Canyon Road City San Ramon Office Sough: House Disbursement For: Sanata Pripose of Disbursement Category Transaction ID : SB218.44526 Amount of Each Disbursement Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Category Transaction ID : SB218.44527 Category Transaction ID : SB218.44527 Amount of Each Disbursement Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name City San Ramon Office Sought: House Disbursement For: Sanata President Chevron Mailing Address 6001 Bollinger Canyon Road City San Ramon Category Transaction ID : SB218.44527 Amount of Each Disbursement his Period Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category Transaction ID : SB218.44527 Amount of Each Disbursement his Period City San Ramon Mailing Address 6001 Bollinger Canyon Road City San Ramon Category Transaction ID : SB218.44527 Amount of Each Disbursement his Period Category Transaction ID : SB218.44527 Amount of Each Disbursement his Period Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Category Transaction ID : SB218.44527 Amount of Each Disbursement his Period City San Ramon Category Transaction ID : SB218.44527 Amount of Each Disbursement his Period Transaction ID : SB218.44527 Amount of Each Disbursement his Period Category Transaction ID : SB218.44527 Amount of Each Disbursement his Period City San Ramon Category Transaction ID : SB218.44527 Amount of Each Disbursement his Period City San Ramon Category Transaction ID : SB218.44527 Amount of Each Disbursement his Period City San Ramon Category Transaction ID : SB218.44527 Amount of Each Disbursement his Period City San Ramon Category Transaction ID : SB218.44527 Amount of Each Disbursement his Period City San Ramon Category		WOMEN SPEAK OUT PAC															
City San Ramon Purpose of Disbursement Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Cardidate Name Clast, First, Middle Initial) Candidate Name Candidate Name Candidate Name Category/ Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Clay San Ramon Purpose of Disbursement Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Clay San Ramon President Category/ Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Travel (9/16	٨	•					Doto of	Dioburoo	mont								
Adailing Address 6001 Bollinger Canyon Road City San Ramon	Α.	Chevron					Date of			V	V	V					
San Ramon		Mailing Address 6001 Bollinger Canyon Road					10			L							
Princes of Disbursement Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Office Sought:		•		1 '			FEC Ide	ntification	Num	ber							
Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Office Sought:			CA	94583					_	-							
Candidate Name Office Sought: House Senate Primary General Travel (g/16/22 Usio Inc. Prepaid Debit Card Purchase) Full Name (Last, First, Middle Initial) Schevron Mailing Address 6001 Bollinger Canyon Road City San Ramon CA 94583 President Travel (g/16/22 Usio Inc. Prepaid Debit Card Purchase) Chevron Mailing Address 6001 Bollinger Canyon Road Category/ Type Transaction ID: SB21B.44527 Amount of Each Disbursement Travel (g/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Transaction ID: SB21B.44527 Amount of Each Disbursement Travel (g/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Transaction ID: SB21B.44527 Amount of Each Disbursement Travel (g/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Transaction ID: SB21B.44527 Amount of Each Disbursement Travel (g/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Transaction ID: SB21B.44527 Amount of Each Disbursement Travel (g/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Office Sought: House Disbursement For: Senate Primary General President Primary General President Disbursement this Period Senate President Disbursement Travel (g/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Office Sought: House Disbursement For: Senate Primary General Primary General Primary General President Disbursement This Period Other (specify) Memo Item Substorial Amount of Each Disbursement This Period Disbursement This Period Other (specify) Memo Item			ase)			7											
Office Sought: House Disbursement For: Senate President Other (specify) ▼ X Memo Item State: Distric: Full Name (Last, First, Middle Initial) Date of Disbursement City State Zip Code San Ramon Sanate President Other (specify) Transaction ID: SB21B.44527 Amount of Each Disbursement Travel (g/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Transaction ID: SB21B.44527 State: District: Primary General President Other (specify) Transaction ID: SB21B.44527 Mailing Address 6001 Bollinger Canyon Road Travel (g/16/22 Usio Inc. Prepaid Debit Card Purchase) Travel (g/16/22 Usio Inc. Prepaid Debit Card Purc		Candidate Name			Category/	/			_			eriod					
Senate Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) B. Chevron Mailing Address 6001 Bollinger Canyon Road City San Ramon CA 94583 Purpose of Disbursement Travet (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name City Senate Primary General Primary General Primary General Other (specify) Full Name (Last, First, Middle Initial) C. Chevron Mailing Address 6001 Bollinger Canyon Road City San Ramon CA 94583 Full Name (Last, First, Middle Initial) C. Chevron Mailing Address 6001 Bollinger Canyon Road City San Ramon CA 94583 Category/ Type Full Name (Last, First, Middle Initial) C. Chevron Mailing Address 6001 Bollinger Canyon Road City San Ramon CA 94583 Category/ Type Furnose of Disbursement Travet (9/16/22 Usio Inc. Prepaid Debit Card Purchase) City San Ramon CA 94583 Category/ Type Transaction ID: SB21B.44528 Amount of Each Disbursement this Period Transaction ID: SB21B.44528 Amount of Each Disbursement this Period Transaction ID: SB21B.44528 Amount of Each Disbursement this Period State: District: Senate Primary General Primary G																	
State: District:							78.44										
State: District: Full Name (Last, First, Middle Initial) B. Chevron Mailing Address 6001 Bollinger Canyon Road City San Ramon Purpose of Disbursement Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Office Sought: House President President State: District: Full Name (Last, First, Middle Initial) C. Chevron Mailing Address 6001 Bollinger Canyon Road City San Ramon President United State Primary General President San Ramon			,														
Full Name (Last, First, Middle Initial) B. Chevron Mailing Address 6001 Bollinger Canyon Road City San Ramon Purpose of Disbursement Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Office Sought: Senate President State: District: Full Name (Last, First, Middle Initial) C. Chevron Mailing Address 6001 Bollinger Canyon Road FEC Identification Number Category/ Type Transaction ID: SB21B.44527 Amount of Each Disbursement this Period First, Middle Initial) C. Chevron Mailing Address 6001 Bollinger Canyon Road Full Name (Last, First, Middle Initial) C. Chevron Mailing Address 6001 Bollinger Canyon Road FEC Identification Number Category/ Type Transaction ID: SB21B.44527 Amount of Each Disbursement Travel (8/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Category/ Type FEC Identification Number FEC Identification Number Category/ Type FEC Identification Number Category/ Type FEC Identification Number Category/ Type Transaction ID: SB21B.44524 Amount of Each Disbursement this Period FEC Identification Number Category/ Type Transaction ID: SB21B.44524 Amount of Each Disbursement this Period FEC Identification Number Category/ Type Transaction ID: SB21B.44524 Amount of Each Disbursement this Period FEC Identification Number Category/ Type 15. 2022			Other (spec	/iiy) ▼			✗ Memo Item										
Mailing Address 6001 Bollinger Canyon Road City San Ramon Purpose of Disbursement Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name City State: District: Full Name (Last, First, Middle Initial) C. Chevron Mailing Address 6001 Bollinger Canyon Road City San Ramon Category/ Type Disbursement For: Senate Primary General City San Ramon Category/ Type Date of Disbursement FEC Identification Number Category/ Type Transaction ID: SB21B.44527 Amount of Each Disbursement this Period In the second	_						+										
City San Ramon Purpose of Disbursement Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Office Sought: Full Name (Last, First, Middle Initial) C. Chevron Mailing Address 6001 Bollinger Canyon Road City San Ramon Mailing Address 6001 Bollinger Canyon Road City San Ramon Purpose of Disbursement Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name City San Ramon Purpose of Disbursement Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Category/ Type Date of Disbursement Category/ Type FEC Identification Number Date of Disbursement FEC Identification Number Category/ Type Transaction ID : SB21B.4452x Amount of Each Disbursement this Period Transaction ID : SB21B.4452x Amount of Each Disbursement this Period Transaction ID : SB21B.4452x Amount of Each Disbursement this Period Transaction ID : SB21B.4452x Amount of Each Disbursement this Period Transaction ID : SB21B.4452x Amount of Each Disbursement this Period Transaction ID : SB21B.4452x Amount of Each Disbursement this Period Transaction ID : SB21B.4452x Amount of Each Disbursement this Period Transaction ID : SB21B.4452x Amount of Each Disbursement this Period Transaction ID : SB21B.4452x Amount of Each Disbursement this Period Transaction ID : SB21B.4452x Amount of Each Disbursement this Period Transaction ID : SB21B.4452x Amount of Each Disbursement this Period Transaction ID : SB21B.4452x Amount of Each Disbursement this Period Transaction ID : SB21B.4452x Amount of Each Disbursement this Period Transaction ID : SB21B.4452x Amount of Each Disbursement this Period	В.						Date of Disbursement										
City San Ramon Purpose of Disbursement Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name City Senate Primary State: District: Full Name (Last, First, Middle Initial) City San Ramon City San Ramon Mailing Address 6001 Bollinger Canyon Road City San Ramon Purpose of Disbursement Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type FEC Identification Number Category/ Amount of Each Disbursement this Period Transaction ID: SB21B.44527 Amount of Each Disbursement Date of Disbursement Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Category/ Type Office Sought: House Primary General Other (specify) Transaction ID: SB21B.44528 Amount of Each Disbursement this Period Transaction ID: SB21B.44528 Amount of Each Disbursement this Period Transaction ID: SB21B.44528 Amount of Each Disbursement this Period Transaction ID: SB21B.44528 Amount of Each Disbursement this Period Transaction ID: SB21B.44528 Amount of Each Disbursement this Period Transaction ID: SB21B.44528 Amount of Each Disbursement this Period Transaction ID: SB21B.44528 Amount of Each Disbursement this Period Transaction ID: SB21B.44528 Amount of Each Disbursement this Period Transaction ID: SB21B.44528 Amount of Each Disbursement this Period Transaction ID: SB21B.44528 Amount of Each Disbursement this Period Transaction ID: SB21B.44528 Amount of Each Disbursement this Period Transaction ID: SB21B.44528 Amount of Each Disbursement this Period Transaction ID: SB21B.44528 Amount of Each Disbursement this Period										Υ		Υ					
San Ramon Purpose of Disbursement Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Category/ Type Date of Disbursement Category/ Type Date of Disbursement Category/ Type Categor			<u> </u>	T- C :			10	15	5	_	2022						
Purpose of Disbursement Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Office Sought: House Senate Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) Chevron Mailing Address 6001 Bollinger Canyon Road City San Ramon Purpose of Disbursement Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Date of Disbursement FEC Identification Number Category/ Type Office Sought: House Primary General Office Sought: House Disbursement For: Senate Primary General Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼ Substoated Primary General Other (speci				I .			FEC Ide	ntification	Num	ber							
Transaction ID: SB21B.44527 Amount of Each Disbursement this Period Office Sought: House Disbursement For: Senate Primary General Other (specify) State: District: City San Ramon Purpose of Disbursement Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Date of Disbursement Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Transaction ID: SB21B.44527 Amount of Each Disbursement Date of Disbursement FEC Identification Number Category/ Type Transaction ID: SB21B.44527 Amount of Each Disbursement Category/ Type Transaction ID: SB21B.44528 Amount of Each Disbursement this Period Senate Primary General Other (specify) State: District: Subtrotal of Disbursements This Page (optional) Odo Odo Disbursement For: Senate Primary General Other (specify) Memo Item Odo Odo Odo Odo Odo Odo Odo Od		Purpose of Disbursement		3-000			C				- 1						
Category/ Type Office Sought: House Disbursement For: Senate President Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) Chevron Mailing Address 6001 Bollinger Canyon Road City State Zip Code San Ramon CA 94583 Purpose of Disbursement Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Category/ Type Transaction ID: SB21B.4452¢ Amount of Each Disbursement this Period FEC Identification Number Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) Substortal of Disbursements This Page (optional)			ase)				saction I	ID : S	B21R	.44527							
Office Sought:		Candidate Name				/			_			eriod					
Senate Primary General Other (specify) Full Name (Last, First, Middle Initial) Chevron Mailing Address 6001 Bollinger Canyon Road City San Ramon CA 94583 Purpose of Disbursement Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Office Sought: House Disbursement For: Senate Primary General Other (specify) State: District: Substortal of Disbursements This Page (optional)		Office Sought: House Dishursen	nent For		туре	_	· · ·				17.38	В					
State: District: Full Name (Last, First, Middle Initial) C. Chevron Mailing Address 6001 Bollinger Canyon Road City San Ramon Purpose of Disbursement Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Office Sought: House Disbursement For: Senate Primary General Other (specify) State: District: SUBTOTAL of Disbursements This Page (optional)				General				7	- 4	,	- 4						
State: District: Full Name (Last, First, Middle Initial) Chevron Mailing Address 6001 Bollinger Canyon Road City San Ramon Purpose of Disbursement Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Office Sought: House Senate President State: District: Substorate Disbursement For: Senate Primary General Other (specify) State: Disbursements This Page (optional)			•	cify)				n Item									
Mailing Address 6001 Bollinger Canyon Road City San Ramon Purpose of Disbursement Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Office Sought: House Primary Senate President State: District: Date of Disbursement FEC Identification Number Category/ Type Transaction ID: SB21B.44528 Amount of Each Disbursement this Period X Memo Item 0.00	_	State: District:					IVICII	io itelli									
Mailing Address 6001 Bollinger Canyon Road City San Ramon Purpose of Disbursement Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Category/ Type Office Sought: House Primary Senate President State: District: Substock Amount of Disbursement For: Senate Primary General Other (specify) ▼ Mailing Address 6001 Bollinger Canyon Road FEC Identification Number Category/ Type Transaction ID: SB21B.44528 Amount of Each Disbursement this Period Mailing Address 6001 Bollinger Canyon Road	_	,					Deta (Olak									
Mailing Address 6001 Bollinger Canyon Road 10	U.	Chevron															
San Ramon Purpose of Disbursement Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Category/ Type Office Sought: House Senate Primary General President Other (specify) ▼ State: District: Substruct: Memo Item Precidentification Number Category/ Type Transaction ID: SB21B.4452€ Amount of Each Disbursement this Period X Memo Item 0.00		Mailing Address 6001 Bollinger Canyon Road								Y		Y					
San Ramon Purpose of Disbursement Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) ▼ State: District: Substruct: Memo Item Category/ Type Transaction ID : SB21B.4452€ Amount of Each Disbursement this Period X Memo Item		City	State	Zip Code			FFC Ide	ntification	Num	her							
Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼ State: District: Substruct: Memo Item Onumber 15.28			CA	94583			-	oatioi i	vuil	.501	-						
Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼ State: District: Transaction ID : SB21B.4452€ Amount of Each Disbursement this Period ### Memo Item O.00			ase)			$\neg \mid \mid$											
Office Sought: House Disbursement For: Senate Primary General President Other (specify) ▼ State: District: Substruct: Memo Item 0.00			Category/									eriod					
Senate Primary General Other (specify) ▼ State: District: Memo Item Subtrotal of Disbursements This Page (optional)		Office Sought: House Disbursen	nent For:		.,,,,	\dashv	l				15.28	8					
State: District: Memo Item SUBTOTAL of Disbursements This Page (optional)			Primary	General						-	1 40						
SUBTOTAL of Disbursements This Page (optional)			Other (spec	cify) 🔻			X Mem	o Item									
SOBTOTAL OF DISDUSCRITCHUS THIS Fage (Optional)	_	State: District:															
TOTAL This Period (last page this line number only)	s	UBTOTAL of Disbursements This Page (optional)				•		7		7	0.0	0					
	_	OTAL This Period (last nage this line number only)				_	Г.										

S	CHEDULE B (FEC Form 3X)			FO	R L	INE I	NUMBER	:			PAGI	E 41 O	F 182				
IT	EMIZED DISBURSEMENTS		arate schedule(s) category of the	(ch		only	′		7.00		00 [
			Summary Page			21b 28a	22 28b		23 28c		26 29	27 30b					
Δr	by information copied from such Reports and State	ments may	not be sold or use	d by a				nur					ions				
	for commercial purposes, other than using the nar																
\setminus	NAME OF COMMITTEE (In Full)																
$ \rangle$	WOMEN SPEAK OUT PAC																
<u></u>	Full Name (Last, First, Middle Initial)									_							
A.							Date o	f Di	sburse	ment							
							M = M	/	D II		Y	Y	Υ				
	Mailing Address 5200 Buffington Rd.						10	4	07			2022					
	City	State	Zip Code				FEC Id	lanti	fication	Nur	mhor						
	Atlanta	GA	30349				_		lication	INUI	ibei						
	Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	ard Purchas	e)			٦l	C										
	Candidate Name			<u></u>	_	41						3.44530					
	Canada Name			Cate:		"	Amount of Each Disbursement this Period										
	Office Sought: House Disburse	ment For:			<u> </u>		60.00										
	Senate	Primary	General														
	President State: District:	Other (spe	ecify) 🔻				✗ Memo Item										
_	Full Name (Last, First, Middle Initial)					_											
В.	,						Date of Disbursement										
							M M / D D / Y Y Y Y										
	Mailing Address 5200 Buffington Rd.			10 08 2								2022					
	City	State	\dashv		lonti	fication	- Niur										
	Atlanta	GA	30349				FEC Id	enu	lication	Nun	nber						
	Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit C	ard Purchas	se)		_	7	C										
	Candidate Name				-	_	Transaction ID : SB21B.44531										
				Cate Ty		"	Amoun	IT OT	Eacn	DISDL	ırseme	ent this P	erioa				
	Office Sought: House Disburse	ment For:					L.		-		-	62.25	5				
	Senate	Primary	General								,						
	President State: District:	Other (spe	ecity)				X Me	emo	Item								
_	Full Name (Last, First, Middle Initial)																
C.	,						Date o	f Di	sburse	ment							
							M I M	1	D		Y	Y Y	Υ				
	Mailing Address 5200 Buffington Rd.							10 08 2022									
	City	State Zip Code						FEC Identification Number									
	Atlanta	GA 30349						-	noation	11011							
	Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	: Card Purchase)					C										
	Candidate Name											3.44532 ent this P	eriod				
		Category/ Type						-			1		-				
		ment For:	7			,			81.30	J							
	Senate President	Primary Other (spe	General														
	State: District:	Office (Spe	√···y) ▼				X Me	emo	Item								
Г								-	-	=	_		_				
s	SUBTOTAL of Disbursements This Page (optional)					•			7	_		0.0	0				
Ļ	OTAL This Period (last page this line number only	`				_			-								
	VIAL THIS FERIOU HASE DAUG THIS TIME NUMBER ONLY	1				.		_	-	_	_	_					

SCHEDULE B (FEC Form 3X)			FOR	LINE	NUMBER			PAG	E 42 OF	182					
ITEMIZED DISBU	IRSEMENTS		arate schedule(s) category of the	`	k only	—′			¬	0.7						
			Summary Page	x	21b 28a	22 28b	23	,	26 29	27 30b						
Any information copied fr	om such Reports and State	ments may	not be sold or use	ad by an												
	es, other than using the na															
NAME OF COMMITTE	E (In Full)															
$ \rangle$ WOMEN SPEA	K OUT PAC															
Full Name (Last, First,	Middle Initial)															
A. Chick-Fil-A	·····au.					Date o	f Disbur	seme	ent							
						M = M	/ D	■ D	/ Y	YYY						
Mailing Address 5200	Buffington Rd.					10		08		2022						
City		State	Zip Code			EEC Id	entificat	ion N	lumber							
Atlanta		GA	30349				Citilloat		diffici							
Purpose of Disbursem Food/Beverage (9/16/	ent 22 Usio Inc. Prepaid Debit C	ard Purchas	se)			C										
Candidate Name				ــــــــــــــــــــــــــــــــــــــ	41				: SB21E							
				Catego Type		Amount of Each Disbursement this Period										
Office Sought:	House Disburse	ment For:	I			40.00										
	Senate	Primary	General													
State: Dist	President rict:	Other (spe	ecity) 🔻			✗ Memo Item										
Full Name (Last, First,																
B. Chick-Fil-A	,					Date of Disbursement										
						M M / D D / Y Y Y Y										
Mailing Address 5200	Buffington Rd.					10	1 -	08		2022	_					
City		State	Zip Code		FEC. Id	entificat	ion N	Jumher								
Atlanta Purpose of Disbursem	ont	GA	30349				on timoda		tallibol	-						
•	ยาเ 22 Usio Inc. Prepaid Debit C	ard Purchas	se)	· · ·		C		_								
Candidate Name				Catego	n/		Transaction ID: SB21B.44534 Amount of Each Disbursement this Pe									
				Type		Amount of Each Disbursement this Period										
Office Sought:		ment For:					-		-	66.74						
	Senate President	Primary Other (spe	General			100										
State: Dist		outlot (ope	,,			X Me	emo Iten	ı								
Full Name (Last, First,	Middle Initial)															
C. Chick-Fil-A						Date o	f Disbur	seme								
Mailing Address 5200	Buffington Rd					10	/ D	08	/ Y	2022	7					
City		State	FEC Identification Number													
Atlanta Purpose of Disbursem	ent	GA 30349														
Food/Beverage (9/16/	22 Usio Inc. Prepaid Debit C	ard Purchas	e)			C	ansactio	n ID	: SB21E	3.44535						
Candidate Name				ry/	Amoun	t of Eac	h Di	sbursem	ent this Pe	eriod						
Office Sought:	House Disburse	ement For:	•					53.08								
	Senate	Primary	General						7	- 40						
	President	Other (spe	ecify) 🔻	X Memo Item												
State: Dist	rict:					L										
CURTOTAL of District	monto This Desa (autieur !)							-		0.00)					
SUBTUTAL OF DISDUISE	ments This Page (optional).				· •	-		+		3.00	-					
TOTAL This Period (last	page this line number only	<i>(</i>)						_								

S	CHEDULE B (FEC Form 3X)			FO	OR	LINE	NUMBER	:			PAGE	= 43 OI	F 182				
IT	EMIZED DISBURSEMENTS		category of the	(c		k only	′		٦		۰۰ ۲						
			Summary Page		X	21b 28a	22 28b		23 28c		26 29	27 30b					
Γ.	over information coming from available Deposits and Oktob																
	ny information copied from such Reports and State for commercial purposes, other than using the nar																
	NAME OF COMMITTEE (In Full)																
	WOMEN SPEAK OUT PAC																
^	Full Name (Last, First, Middle Initial)						Doto	f Di	sburse	mont							
Α.	Chick-Fil-A						Date C	וט וו				Y					
	Mailing Address 5200 Buffington Rd.						10		08		L	2022					
	City	State	Zip Code				FFC Id	denti	fication	. Nur	nber						
	Atlanta	GA	30349						- Ioatioi	- Train	11001						
	Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	ard Purchas	se)	Г.			C										
	Candidate Name				_	_						.44536					
				Cate	egor ype	'y/	Amount of Each Disbursement this Period										
	Office Sought: House Disburse	ment For:			,,,,		88.61										
	Senate	Primary	General														
	President	Other (spe	ecify) 🔻				✗ Memo Item										
_	State: District:																
В.	Full Name (Last, First, Middle Initial) Chick-Fil-A						Date of Disbursement										
٥.	CHICK-FII-A						M M / D D / Y Y Y										
	Mailing Address 5200 Buffington Rd.			10 08								2022					
	,	State		FEC Id	denti	fication	n Nur	nber									
	Atlanta Purpose of Disbursement	GA	30349					-	-	_		-					
	Food/Beverage (9/16/22 Usio Inc. Prepaid Debit C	ard Purchas	se)	Г.			C										
	Candidate Name			Cate	agor	2//	Transaction ID: SB21B.44537 Amount of Each Disbursement this F										
					ype	y,	7 tilloui	. 0.	Laon	Diobe	21001110	JII 1110 1 V	Jilou				
	Office Sought: House Disburse	ment For:							-		7-1	25.89)				
	Senate	Primary	General														
	President State: District:	Other (spe	ecity)				X Me	emo	Item								
_	Full Name (Last, First, Middle Initial)																
C.	,							_	sburse				V				
	Mailing Address 5200 Buffington Rd.							10 08 2022									
	City	State	Zip Code				FFC Id	denti	fication	 Nur	nber						
	Atlanta Durance of Dishuranment	GA	30349									-					
	Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	Card Purchase)					C	ans	action	ID : :	SB21E	3.44538					
	Candidate Name	Category/						nt of	Each	Disbu	urseme	ent this Pe	eriod				
	Office Sought: House Disburse	Type Type										40.00)				
	Senate	Primary	General	General						_		- 45					
	President	Other (spe	ecify) 🔻	y) ▼					Item								
_	State: District:						X Me										
5	SUBTOTAL of Disbursements This Page (optional)					•		_				0.00	0				
\vdash	·								-	=	-		一				
1 1	OTAL This Period (last page this line number only	')							_								

SCHEDULE B (FEC Form 3X)	Ī		FOR I	LINE	NUMBER:			F	AGE	44 O	F 182				
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the	(check	,	—′		Г		_	7.07					
		Summary Page	×	21b 28a	22 28b	23	L	26 29		27 30b					
Any information copied from such Reports and State	ments may	not be sold or use	ad by any												
or for commercial purposes, other than using the nar															
NAME OF COMMITTEE (In Full)															
Full Name (Last, First, Middle Initial)									—						
A. Chick-Fil-A					Date of	f Disbur	sen	nent							
					M = M	/ D	10	/		Y	Y				
Mailing Address 5200 Buffington Rd.					10		09	_	2	2022	_				
City	State	Zip Code			FEC Id	entificat	ion	Numb	er						
Atlanta	GA	30349													
Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	ard Purchas	e)			C										
Candidate Name		,		-11		nsaction									
			Categor Type	y/	Amount of Each Disbursement this Period										
Office Sought: House Disburser	ment For:				53.82										
Senate	Primary	General													
State: District:	Other (spe	ecity) 🔻			✗ Memo Item										
Full Name (Last, First, Middle Initial)															
B. Chick-Fil-A					Date of Disbursement										
					M = M / D = D / Y = Y = Y										
Mailing Address 5200 Buffington Rd.				10 09 2022											
City	State	Zip Code		FEC. Id	entificat	ion	Numh	er							
Atlanta	GA	30349				Citanoa		T T T T T T T T T T T T T T T T T T T	0.	-					
Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	ard Purchas	se)			С										
Candidate Name			Categor	v/		Transaction ID : SB21B.44540 Amount of Each Disbursement this Pe									
			Type	y,	Amount of Each Dispursement this Period										
	ment For:									79.71	1				
Senate President	Primary	General													
State: District:	Other (spe	city)			X Me	mo Iter	n								
Full Name (Last, First, Middle Initial)															
C. Chick-Fil-A					Date of	f Disbur	sen	nent							
Mailing Address 5200 Buffington Rd.					M M M	/ D	09	/		2022	Y				
Mailing Address 5200 Builington Rd.		10	-	00			-022	_							
	State	FEC Id	entificat	ion	Numb	er									
Atlanta Purpose of Disbursement	GA 30349						-	-	_	7					
Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	ard Purchas	e)	· · ·		C	ansactio		D . CD	24 D	44544					
Candidate Name		y/						4434 i nt this P	eriod						
05					-	•	_	20.0	7						
Office Sought: House Disburser Senate	ment For: Primary	General				-	-	7		28.27					
President	Other (spe				V										
State: District:	(Spo	<i>3</i> , 4			X Me	mo Iter	n								
							-	-	_		$\overline{}$				
SUBTOTAL of Disbursements This Page (optional)				•						0.0	0				
TOTAL This Period (last page this line number only)			_							$\neg \neg$				

SC	CHEDULE B (FEC Form 3X)			EOD LINE	NUMBER: PAGE 45 OF 182										
	EMIZED DISBURSEMENTS		arate schedule(s)	(check on	THO MIDELL.										
			category of the Summary Page	` 🗶 21b	· ·										
		Dotalied		28a	28b 28c 29 30b										
	y information copied from such Reports and State for commercial purposes, other than using the nar														
	NAME OF COMMITTEE (In Full)														
\rangle	WOMEN SPEAK OUT PAC														
_	Full Name (Last, First, Middle Initial)				Date of Dishamanan										
Α.	Chick-Fil-A				Date of Disbursement										
	Mailing Address 5200 Buffington Rd.				10 09 2022										
	City	State	Zip Code		FEC Identification Number										
	Atlanta	GA	30349												
	Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	ard Purchas	e)												
	Candidate Name	ard r dronas	C)		Transaction ID : SB21B.44542										
	Candidate Name			Category/ Type	Amount of Each Disbursement this Period										
	Office Sought: House Disburse	ment For:		Туре	20.00										
	Senate	Primary	General		7 7										
	President	Other (spe	cify) 🔻		✗ Memo Item										
	State: District:														
_	Full Name (Last, First, Middle Initial)				Date of Disbursement										
B.	Chick-Fil-A														
	Mailing Address 5200 Buffington Rd.				10 10 2022										
	Maining / Red 2000 3200 Builington Nu.														
	City	State	Zip Code		FEC Identification Number										
	Atlanta	GA	30349												
	Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit C	ard Purchas	e)		C										
	Candidate Name		·	Ontonomil	Transaction ID : SB21B.44543										
				Category/ Type	Amount of Each Disbursement this Period										
	Office Sought: House Disburse	ment For:			75.93										
	Senate	Primary	General												
	President	Other (spe	cify)		X Memo Item										
_	State: District:														
C	Full Name (Last, First, Middle Initial) Chick-fil-a				Date of Disbursement										
٥.	Chick-iii-a														
	Mailing Address 5200 Buffington Rd.				10 12 2022										
	City	State	Zip Code		FEC Identification Number										
	Atlanta Purpose of Disburgement	GA	30349												
	Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	ard Purchase	e)		C										
	Candidate Name			Category/	Transaction ID: SB21B.44544 Amount of Each Disbursement this Period										
				Type											
		ment For:			40.00										
	Senate President	Primary	General												
	State: District:	Other (spe	ciiy) ▼		X Memo Item										
Г	- District.														
s	UBTOTAL of Disbursements This Page (optional)				0.00										
Ĕ	and a section and a section and a														
т	OTAL This Period (last page this line number only)													

SCHEDULE B (FEC Form 3X)	lles com	woto och saled s/s/		E NUMBER	:		PAGE	= 46 O	F 182					
ITEMIZED DISBURSEMENTS		rate schedule(s) category of the	(check or				00 5							
		Summary Page	X 21		23 28c		26 29	27 30b						
Any information copied from such Departs and Chateren	onte mou :	not be sold or							one					
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam														
NAME OF COMMITTEE (In Full)														
WOMEN SPEAK OUT PAC														
Full Name (Last, First, Middle Initial)				5.										
A. Chick-fil-a				Date o	f Disburs	ement								
Mailing Address 5200 Buffington Rd.				10		14	Y	2022	Y					
City	State	Zip Code		FFC Is	lontification	n Nium	mhor							
Atlanta	GA	30349		FEC IC	lentification	n Nur	nber							
Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	rd Purchase	,		C										
Candidate Name	Ta i dionasc	"		I	ansactio									
Sandidate Name			Category/ Type	Amount of Each Disbursement this Period										
Office Sought: House Disbursen	nent For:		туре					10.48	3					
	Primary	General		7 7 7										
President	Other (spec	cify) 🔻		✗ Memo Item										
State: District:				A Mono nom										
Full Name (Last, First, Middle Initial)														
B. Chick-fil-a				Date of Disbursement										
Mailing Address 5000 Puffeetes Pd				M M		15	Y	2022	Y					
Mailing Address 5200 Buffington Rd.				13		2022								
City	State	Zip Code		EEC I	lentification	n Niir	nher							
7 11.57.15	GA	30349			i c riuncalio	ni inul	iibei	-						
Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	rd Purchase	<u>)</u>		C										
Candidate Name		,			ansaction									
Canadate Name			Category/ Type	Amoun	t of Each	Disbu	urseme	ent this P	eriod					
Office Sought: House Disbursen	nent For:		1900	-				2.30	3					
Senate	Primary	General					-	1 46						
President	Other (spec	cify)		X Me	emo Item									
State: District:				THE WAY	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,									
Full Name (Last, First, Middle Initial)														
C. Chick-fil-a				Date o	f Disburs									
Mailing Address 5200 Buffington Rd.				10		15	Y	2022	Y					
maining / dai 000 0200 Buillington Nu.				10					_					
City	State	Zip Code		FFC In	lentification	n Nur	nber							
Atlanta	GA	30349				1401		-						
Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	rd Purchase	e)		C										
Candidate Name		<u>, </u>	Category/	I	ansactio				namic -l					
			Amoun	t of Each	ומצוע ו	urseme	ent this P	eriod						
Office Sought: House Disbursen	nent For:		Туре			_	_ :	71.98	3					
Senate	Primary	General			- 7		- y							
	Other (spec	cify) 🔻		X Me	emo Item									
State: District:														
								0.0	0					
SUBTOTAL of Disbursements This Page (optional)			······ >			_	7	0.0						
TOTAL This Period (last page this line number only).														

SCHEDULE B (FEC Form 3X)	lles com	wata ach saluls (1)	1 -		JMBER:			PAGE	47 O	F 182					
ITEMIZED DISBURSEMENTS		rate schedule(s) category of the	· · · · · ·	only or	· _		^	e –	7 07						
		Summary Page		21b 28a	22 28b	23 28c	2 2		27 30b						
Any information copied from such Reports and Statem	l Lents may n	not he sold or us								one					
or for commercial purposes, other than using the nam															
NAME OF COMMITTEE (In Full)															
WOMEN SPEAK OUT PAC															
Full Name (Last, First, Middle Initial)					Doto of	Diob	meri								
A. Chick-fil-a					Date of										
Mailing Address 5200 Buffington Rd.					10	15			2022	Y					
,	State	Zip Code			FEC Ide	ntification	Num	her							
7 1150 1150	GA	30349				inoation	· · · · ·		-						
Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Cal	rd Purchase	e)		$\neg \sqcap$	C										
Candidate Name		,	Code	_	Transaction ID : SB21B.44548 Amount of Each Disbursement this Period										
			Category. Type	″	Amount of Each Disbursement this Period										
Office Sought: House Disbursem	nent For:		21:-	\dashv	40.00										
	Primary	General													
	Other (spec	cify) 🔻			✗ Memo Item										
					_										
Full Name (Last, First, Middle Initial) B. Chick-fil-a					Date of Disbursement										
Griick-iii-a					M - M	/ D		Υ	Y	Υ					
Mailing Address 5200 Buffington Rd.					5		2022								
,	State	Zip Code			FEC Ide	ntification	Num	ber							
Atlanta Purpose of Disbursement	GA	30349						_							
Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	rd Purchase	e)		7	C										
Candidate Name			Category. Type	,,	Tran Amount	saction of Each				eriod					
Office Sought: House Disbursem	nent For:		71: -						65.13	3					
	Primary	General				7		,							
	Other (spec	cify)			X Mem	o Item									
State: District:				- '											
Full Name (Last, First, Middle Initial) C. Chick-fil-a					Date of	Disburse	ment								
- Offick-III-a					M M	/ D		Υ	Y	Υ					
Mailing Address 5200 Buffington Rd.					10	15			2022						
,	State	Zip Code			FEC Identification Number										
Atlanta Purpose of Disbursement	GA	30349		Щ і	-			_	-						
Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Car	rd Purchase	e)		$\sqcap \sqcap$											
Candidate Name	Category/					saction of Each				eriod					
Office Sought: House Disbursem	nent For:	l.	21:-						58.05	5					
	Primary	General				7									
	Other (spec	cify) 🔻			X Mem	o Item									
State: District:															
SUBTOTAL of Disbursements This Page (optional)				>				-	0.0	0					
TOTAL This Period (last page this line number only).			,	_	· · ·										

S П

S	CHEDULE B (FEC Form 3X)			F	OR I	LINE I	NUMB	ER:				P/	4GE	48	OF	182		
IT	EMIZED DISBURSEMENTS		rate schedule(s) category of the	(0		c only 21b		, r	— ,	22		1 26	_	27				
			Summary Page		×	21b 28a	2 2	2 3b		23 28c		26	 -	30b				
Αı	ny information copied from such Reports and Statem	nents may n	ot be sold or use	ed by	any						of so		ng c			s		
	for commercial purposes, other than using the name																	
	NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC																	
_	Full Name (Last, First, Middle Initial)												•					
Α.	Chick-fil-a						Dat	e of I	Disb	ursei	_	nt						
	Mailing Address 5200 Buffington Rd.						М	10	'	16	- 1	Ĺ		2022	Y			
	City S Atlanta	State GA	Zip Code 30349				FE) Ide	ntific	ation	ı Nı	umbe	er:					
	Purpose of Disbursement			_	-	_	С											
	Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	rd Purchase))	L			U	Tran	sac	tion	ID :	SB2	21B.	44551				
	Candidate Name				egor ype	y/	Amount of Each Disbursement this Period											
	Office Sought: House Disbursen	nent For:			уре		29.76											
		Primary	General															
	State: District:	Other (speci	шу) ▼				✗ Memo Item											
_	Full Name (Last, First, Middle Initial)																	
В.	Chick-fil-a						Date of Disbursement											
	Mailing Address 5200 Buffington Rd.						10 16 2022											
	City S Atlanta	State GA		FE	Ide	ntific	ation	Νι	umbe	∍r								
	Purpose of Disbursement		30349		-	_	C											
	Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca Candidate Name	ard Purchase)	L			Transaction ID : SB21B.44552											
	Candidate Name				egor ype	y/	Am	ount	of E	ach	Disl	ourse	∍mer	nt this	Perio	bc		
	Office Sought: House Disbursen	nent For:			71-		70.53											
		Primary Other (speci	General				Ξ		,									
	State: District:	Other (speci	iiy)				X	Mem	o It	em								
	Full Name (Last, First, Middle Initial)																	
C.	Chick-fil-a								Disb	ursei	_	nt —						
	Mailing Address 5200 Buffington Rd.							M I O	/	17	_			2022	Y			
		State Zip Code						FEC Identification Number										
	Atlanta Purpose of Disbursement	GA 30349					С	_	_			_						
	Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	ard Purchase)						Tran	sac	tion	ID :	: SB2	21B.	44553				
	Candidate Name	Category/						ount	of E	ach	Disl	burse	emer	nt this	Perio	bc		
	Office Sought: House Disbursen	Type ement For:												71.	.47			
		Primary	,						7			-				_		
	State: President State:	Other (speci	ify) ▼				X	Mem	o It	em								
Г	outo. District.						_		_	_	_	_	=	_		_		
5	SUBTOTAL of Disbursements This Page (optional)					•		_					_	0	.00			
Γ,	OTAL This Period (last page this line number only)					_							_					
ι'	VIAL THIS I CHOW (IASE PAYE THIS HITE HUTTING OTHY)				• • • • • • •						- 1	- 1						

SC	CHEDULE B (FEC Form 3X)			FO	R L	INE N	IUMBE	R:				PAGI	E 49	OF	182
T	EMIZED DISBURSEMENTS		rate schedule(s) category of the	I ` _		only	′		-	_		r			
			Summary Page	1 -		21b 28a	22 28b	, -	23 28c	L		6 9	27		
Δr	ny information copied from such Reports and Statem	nente may n	not he sold or use	d by a						of 4					10
	for commercial purposes, other than using the name														
\rangle	NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC														
۹.	Full Name (Last, First, Middle Initial) Chick-fil-a						Date	of D	isburse	eme	ent	Y	YYY	T Y	
	Mailing Address 5200 Buffington Rd.						10			18	_	느	2022	-	
	City Stlanta	State GA	Zip Code 30349				FEC	ldent	ificatio	n N	Num	ber	_		
	Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	ard Purchase)		Ţ		С	rans	action	ı ID) : S	B21E	3.4455	4	
	Candidate Name			Cate Typ	,	'/	Amou	int of	Each	Dis	sbur	rseme	-	-	iod
		nent For: Primary Other (spec	General General				X N	10ma	Item	_			13	3.14	
	State: District:							dellio	, iteiii						
3.	Full Name (Last, First, Middle Initial) Chili's						Date	of D	isburse	eme	ent /	Y	YYY	■ Y	1
	Mailing Address 6820 LBJ Freeway						10)		15	_	L	2022	-	
	City S Dallas	State TX	Zip Code 75240				FEC	ldent	ificatio	n N	Num	ber			
	Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca		1	_	-	╗	С	Ι				\equiv			
	Candidate Name			Cateo Typ		·/	-		action Each					-	iod
		Primary	General				L.	_	7	_			12′	1.53	
	President State: District:	Other (spec	ify)				X	1emo	Item						
С.	Full Name (Last, First, Middle Initial) Chipotle								isburse		ent				
	Mailing Address 610 Newport Center Dr						1 C		0	06		L	2022	= Y	
	Newport Beach	State CA	Zip Code 92660				FEC	ldent	ificatio	n N	Num	ber	_	_	
	Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	ard Purchase)		Ī		C	rans	action	ı ID) : S	B21E	3.4455	7	
	Candidate Name			Cateo Typ		'/	Amou	int of	Each	Dis	sbur	seme	_	-	iod
		nent For: Primary Other (spec	General ify) ▼				X	/lemo	Item	_			34	4.81	
_							T	-		_	-	_	-	0.00	$\overline{}$
	SUBTOTAL of Disbursements This Page (optional)					_	H	÷	7	=	-	7	=	3.00	닉
I	OTAL This Period (last page this line number only)														

SCHEDULE B (FEC Form 3X)	lle:		FOR LINE			PAGE 50 OF 182
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the	(check only		7.00 <u> </u>	
		Summary Page	X 21b 28a	22 28b	23 28c	26 27 29 30b
Any information copied from such Departs and Chita	monto moss	not be sold or was				
Any information copied from such Reports and State or for commercial purposes, other than using the national states of the state of the						
NAME OF COMMITTEE (In Full)						
WOMEN SPEAK OUT PAC						
Full Name (Last, First, Middle Initial)				Date of Di	oburoomor	nt.
A. Chipotle				Date of D	Spursemer	/
Mailing Address 610 Newport Center Dr				10	07	2022
City	State	Zip Code		FEC Ident	fication Nu	ımber
Newport Beach Purpose of Disbursement	CA	92660				
Food/Beverage (9/16/22 Usio Inc. Prepaid Debit C	ard Purchase	e)		C		
Candidate Name			Category/			SB21B.44558 pursement this Period
			Type	J. MIGGINE OF		
	ment For:					74.09
Senate President	Primary Other (spe	General				
State: District:	Outer (Spe	ony) ▼		★ Memo	Item	
Full Name (Last, First, Middle Initial)						
B. Chipotle				Date of Di		
Mailing Address 610 Newport Center Dr				10	08	2022
maining statistics of the Wport definer bi				.,0	90	
City	State	Zip Code		FEC Ident	fication Nu	ımber
Newport Beach Purpose of Disbursement	CA	92660				
Food/Beverage (9/16/22 Usio Inc. Prepaid Debit C	ard Purchas	e)		C		
Candidate Name			Category/			SB21B.44559 cursement this Period
Office Sought: House Bishams	ment For:		Type			97.07
Office Sought: House Disburse Senate	ment For: Primary	General				97.07
President	Other (spe			V	14	
State: District:				X Memo	item	
Full Name (Last, First, Middle Initial)						
C. Chipotle				Date of Di	sbursemer	
Mailing Address 610 Newport Center Dr				10	08	2022
Maining Additions of the Newport Certier Di				10	ÜÜ	2022
City	State	Zip Code		FEC Ident	fication Nu	ımber
Newport Beach Purpose of Disbursement	CA	92660				
Food/Beverage (9/16/22 Usio Inc. Prepaid Debit C	ard Purchase	e)				
Candidate Name			Category/			SB21B.4456(oursement this Period
Office Sought: House Disburse	ment For:		Туре			22.73
Senate Dispulse	Primary	General				
President	Other (spe			X Memo	Itam	
State: District:	1			Ivieillo	ILCIII	
SUBTOTAL of Disbursements This Page (optional).			·····•			0.00
TOTAL This Period (last nage this line number only	·					
TOTAL This Period (last page this line number only	J				4	

	CHEDULE B (FEC Form 3X)	lles	woto och add - (-)		NUMBER:		PAGE 51	OF 182
IT	EMIZED DISBURSEMENTS		rate schedule(s) category of the	(check onl	' — ' —	□		
			Summary Page	X 21b 28a	22 28b	23 28c	26 27 29 30b)
Δn	ny information copied from such Reports and Staten	nente may r	not be sold or uso					
	for commercial purposes, other than using the nam							
	NAME OF COMMITTEE (In Full)							
	WOMEN SPEAK OUT PAC							
٨	Full Name (Last, First, Middle Initial)				Data of D	isburseme	nt	
Α.	Chipotle				Date of D	/ D D	/ Y Y Y	V
	Mailing Address 610 Newport Center Dr				10	09	2022	
	,	State	Zip Code		FEC Iden	tification N	umber	
	Newport Beach Purpose of Disbursement	CA	92660					1
	Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	rd Purchase	e)	· · · ·	C			
	Candidate Name			Category/			: SB21B.44561 bursement this	
				Type				
	Office Sought: House Disbursen					7	42	.93
		Primary Other (spec	General					
	State: District:	Janor (opec	··· <i>y</i> / ▼		★ Memo	Item		
_	Full Name (Last, First, Middle Initial)							
B.	Chipotle				Date of D	isburseme	nt	Y
	Mailing Address 610 Newport Center Dr				10	13	2022	
	,	State	Zip Code		FEC Iden	tification N	umber	
	Newport Beach Purpose of Disbursement	CA	92660					1
	Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	ard Purchase	e)		C.			l
	Candidate Name			Category/ Type			SB21B.44562 bursement this	
	Office Sought: House Disbursen	nent For:				45-1-1	27	.64
		Primary	General			,		
	State: District:	Other (spec	сіту)		X Memo	Item		
_	Full Name (Last, First, Middle Initial)							
C.	Chipotle				Date of D	isburseme	nt	
					M = M	/ D D	/ Y Y Y Y	Y
	Mailing Address 610 Newport Center Dr				10	13	2022	
	City	State	Zip Code		EEC Idon	tification N	umber	
	Newport Beach	CA	92660			mcauon N	uiiibel	1
	Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	rd Purchase	e)		C			
	Candidate Name		<u></u>	Category/ Type			: SB21B.44563 bursement this	
	Office Sought: House Disbursen	nent For:		iype	-		22	.36
		Primary	General			7	7	-
	President	Other (spec	cify) ▼		X Memo	Item		
_	State: District:				<u> </u>			
s	SUBTOTAL of Disbursements This Page (optional)			·····•		7	(0.00
Ļ	OTAL This Poyled (lest page this line growth at an I A					-		
	OTAL This Period (last page this line number only)							4 A 1

S	CHEDULE B (FEC Form 3X)			FO	R L	INE I	NUMBER	:			PAG	E 52 C	F 182
IT	EMIZED DISBURSEMENTS		arate schedule(s) category of the	(ch		only			1.00		00 [
			Summary Page			21b 28a	22 28b		23 28c		26	27 30b	
Γ.	Clate												
	ny information copied from such Reports and State for commercial purposes, other than using the nar												
\setminus	NAME OF COMMITTEE (In Full)												
	WOMEN SPEAK OUT PAC												
^	Full Name (Last, First, Middle Initial)						Data a	t D:					
Α.	Chipotle						Date o	וט ז					
	Mailing Address 610 Newport Center Dr						10		14		Ĺ	2022	
	City	State	Zip Code				FEC Io	lenti	fication	n Nur	mber		
	Newport Beach	CA	92660						noution	- 110		-	
	Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	ard Purchas	se)		7	7	C						
	Candidate Name				_	41						3.44564	
	Cardidate Name			Cate Ty		//	Amoun	t of	Each	Disbu	urseme	ent this F	Period
	Office Sought: House Disburse	ment For:		-,					_ :		_ :	18.7	5
	Senate	Primary	General						,		7		
	President	Other (spe	ecify) 🔻				✗ M∈	emo	Item				
_	State: District:												
В.	Full Name (Last, First, Middle Initial) Chipotle						Date o	f Di	sburse	ment	t		
	Chipotie						M M		D			Y	Υ
	Mailing Address 610 Newport Center Dr						10	1	1:		L	2022	
	,	State	Zip Code				FEC Io	lenti	fication	ı Nur	mber		
	Newport Beach Purpose of Disbursement	CA	92660					-	-	_	-		
	Food/Beverage (9/16/22 Usio Inc. Prepaid Debit C	ard Purchas	se)			П	C						
	Candidate Name			Cate		//						.44565 ent this F	Period
	Office Sought: House Disburse	ment For:		- ,	-		1.					6.1	0
	Senate	Primary	General							_	7	-	
	President	Other (spe	ecify)				X Me	emo	Item				
_	State: District:												
C.	Full Name (Last, First, Middle Initial) Cips Coffee Roaster						Date o	f Di					
	Mailing Address 2780 W Village Dr Suite B,						10	′	17	_	Y	2022	Y
	City	State	Zip Code				FEC Io	lenti	fication	n Niii	mher		
	Suwanee	GA	30024					.0116	oatioi	· · ·		-	
	Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	ard Purchas	se)	Γ.	Ţ		C	ans	action	ID:	SB21E	3.44567	
	Candidate Name			Cate		//	Amoun	t of	Each	Disb	urseme	ent this F	Period
	Office Sought: House Disburse	ment For:		ıy	۲۰							83.9	1
	Senate	Primary	General						,	_	7	- 4	
	President	Other (spe	ecify) 🔻				X Me	emo	Item				
	State: District:							0	.,5,,,,				
8	SUBTOTAL of Disbursements This Page (optional)					-		Ť			4	0.0	00
L							_		-				_
ΙT	TOTAL This Period (last page this line number only)							_				

	CHEDULE B (FEC Form 3X) EMIZED DISBURSEMENTS		rate schedule(s)			LINE I	NUMBEF one)	R:			PAG	E 53 C	F 182
•	LIVIIZED DISBORSEIVIEN 13		category of the Summary Page	`	X	21b	22		23		26 [27	
						28a	28b		28c		29	30b	
	ny information copied from such Reports and Stater for commercial purposes, other than using the nar												
\rangle	NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC												
۹.	Full Name (Last, First, Middle Initial) Circle M						M	of Di	sburse	D /	Y	2022	Y
	Mailing Address 5317 T L Bower Way		ı				10	_	1	0		2022	
	City Oakwood	State CA	Zip Code 30566				FEC I	dent	fication	n Nun	nber		
	Purpose of Disbursement Travel (9/16/22 Usio Inc. Prepaid Debit Card Purch Candidate Name	ase)										3.44569	
				Cat T	egoi ype	γ/	Amoui	nt of	Each	Disbu	ırsem	ent this F	-
	Office Sought: House Disburser Senate President	ment For: Primary Other (spec	General						lia	_	7	54.4	9
	State: District:						X M	emo	Item				
3.	Full Name (Last, First, Middle Initial) Circle M						M = N	of Di	sburse	D /	Υ	Y	Y
	Mailing Address 5317 T L Bower Way						10	_	1	8	L	2022	
	City Oakwood Purpose of Disbursement	State CA	Zip Code 30566					dent	fication	Nur	nber	-	
	Travel (9/16/22 Usio Inc. Prepaid Debit Card Purch Candidate Name	nase)		Cat	egoi	ry/					. — — . —	.44570 ent this F	eriod
	Office Sought: House Disburser Senate President	ment For: Primary Other (spec	General				X M	omo	Item	-	7	36.1	8
	State: District:						IVI	CITIO	item				
С.	Full Name (Last, First, Middle Initial) Citgo						Date of	_	sburse		Υ	Y	Y
	Mailing Address 1293 Eldridge Parkway						10		1:	3	L	2022	
	City Houston	State TX	Zip Code 77077				FEC I	dent	fication	n Nun	nber		
	Purpose of Disbursement Travel (9/16/22 Usio Inc. Prepaid Debit Card Purch	ase)		_	_	\neg	C	_		· ·	20045	14576	
	Candidate Name			Cat	egoi ype	y/						8.44572 ent this F	eriod
	Senate President	ment For: Primary Other (spec	General Cify) ▼		<i>y</i> -		X M	emo	Item	-	-	53.4	9
	<u> </u>						_	-	-	-	-	0.0	10
	SUBTOTAL of Disbursements This Page (optional)					<u> </u>	H	÷	7	-	7	0.0	o .
Т	OTAL This Period (last page this line number only))						_	_	_	_		

SCHEDULE B (FEC Form 3X)			FOR LIN	E NUMBER:		PAG	E 54 OF 18
ITEMIZED DISBURSEMENTS		eparate schedule(s) th category of the	(0110011 01	·			
		d Summary Page	X 21 28		23 28c	26	27 30b
Any information popular from such Departs and Ch							
Any information copied from such Reports and Sta or for commercial purposes, other than using the I							
NAME OF COMMITTEE (In Full)							
WOMEN SPEAK OUT PAC							
Full Name (Last, First, Middle Initial)				5.	5		
A. Citgo				Date of	Disburse		
Mailing Address 1293 Eldridge Parkway				10	1	4 Y	2022
City	State	Zip Code		FEC Ide	entificatio	n Number	
Houston	TX	77077					
Purpose of Disbursement Travel (9/16/22 Usio Inc. Prepaid Debit Card Pu	rchase)			C			
Candidate Name						ID : SB21E	
			Category/ Type	Amount	of Each	Disbursem	ent this Period
Office Sought: House Disbur	sement For:		,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,,	 [45.38
Senate	Primary	General			, , , , ,		
State: District:	Other (sp	pecify) ▼		✗ Me	mo Item		
Full Name (Last, First, Middle Initial)				+			
B. Citgo				Date of	Disburse	ment	
				M = M	/ D	D / Y	YYY
Mailing Address 1293 Eldridge Parkway				10	1	4	2022
City	State	Zip Code		FEC Id	entificatio	n Number	
Houston Purpose of Disbursement	TX	77077		C			-
Travel (9/16/22 Usio Inc. Prepaid Debit Card Pu	rchase)					ID ODO45	. 44574
Candidate Name			Category/			ID: SB21E Disbursem	ent this Period
			Type				45.00
Office Sought: House Disbur	sement For:	Ganaral					45.00
President	Other (sp	General Gecify)					
State: District:	(-	,		X Me	mo Item		
Full Name (Last, First, Middle Initial)							
C. Collins, Cayla, , ,				Date of	Disburse	ment	
Mailing Address 2800 Shirlington Road				10	/ D 0		2022
Suite 1200				10			ZUZZ
City	State	Zip Code		FEC Id	entificatio	n Number	
Arlingnton Purpose of Disbursement	VA	22206					-
Travel / Food/Beverage / Postage (Partial Below	Threshold)						
Candidate Name			Category/			ID: SB218 Disbursem	B.43772 ent this Period
			Type	7	0	2.000.00	
	sement For:			T L.			346.07
Senate	Primary	General					
State: District:	Otner (sp	pecify) ▼		Me	mo Item		
District.							
SUBTOTAL of Disbursements This Page (optional	l)						346.07
9 (3)	-				7		
TOTAL This Period (last page this line number of	nlv)						

S П

S	CHEDULE B (FEC Form 3X)	11		FOF	RLINE	NUMBER	:			PAG	E 55 O	F 182
IT	EMIZED DISBURSEMENTS		rate schedule(s) category of the	_ I ` _	ck only	one)		23		26	27	
			Summary Page		28a	28b		28c		29	30b	
Ai	ny information copied from such Reports and Staten	nents may n	ot be sold or us	ed by ar	ny pers	on for the	pur	ose o	of so	oliciting	contributi	ons
	for commercial purposes, other than using the name											
	NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC											
\angle												
Α.	Full Name (Last, First, Middle Initial) USPS					Date o	f Dis	burse	men	ıt		
						M = M	/	D	- 1	/ Y	Y	Υ
	Mailing Address 2850 S Quincy St					09	_	21	1	L	2022	
	,	State VA	Zip Code 22206			FEC Io	dentif	ication	n Nu	ımber		
	Arlington Purpose of Disbursement	VA	22206							-	-	
	Shipping			Г.	П	C				00045	40770	
	Candidate Name			Categ	orv/					-	3.43772 ent this P	eriod
				Тур			-		-	-	27.07	
	Office Sought: House Disburser Senate	nent For: Primary	General					,	-	7	27.85)
	President	Other (spec				14 14		14				
	State: District:	()	, ,			X M∈	emo	Item				
	Full Name (Last, First, Middle Initial)											
В.	Collins, Cayla, , ,					Date o	of Dis	burse			Y	V
	Mailing Address 2800 Shirlington Road Suite 1200					10]	00	- 1	Ĺ	2022	
	,	State VA	Zip Code			FEC Io	dentif	ication	n Nu	ımber		
	Arlingnton Purpose of Disbursement	VA	22206		_	С		-			-	
	Travel / Mileage			1:			ansa	ction	ID ·	SB21B	43772	
	Candidate Name			Catego							ent this P	eriod
	Office Sought: House Disburser	ment For:		71-					Ü		133.00	ם [
	Senate	Primary	General					,				
	President State: District:	Other (spec	ify)			X M∈	emo	Item				
	Full Name (Last, First, Middle Initial)											
C.	Collins, Cayla, , ,					Date o	f Dis	burse	men			
	Mailing Address 2800 Shirlington Road					M M M	_ ′	13	- 1	/ Y	2022	Y
	Suite 1200											
	-	State	Zip Code			FEC Io	dentif	ication	n Nu	ımber		
	Arlingnton Purpose of Disbursement	VA	22206			С				-	-	
	Travel/ Food/Beverage / Supplies / Gift Card Prizes	(Partial Belo	ow Threshold)				ansa	ction	ID ·	SB21E	43980	
	Candidate Name			Categ							ent this P	eriod
	Office Sought: House Disburser	ment For		Тур	e 						262.99	9
	Senate Stagnis	Primary	General				-	,	+	7	- 46	
	President	Other (spec	:ify) ▼			Me	emo	Item				
_	State: District:					L IVIC		.,				
5	SUBTOTAL of Disbursements This Page (optional)				··· ▶			T		75	262.9	9
\vdash								-				-
1	TOTAL This Period (last page this line number only)				▶			,		7		

S П

SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER:		PAGE 56 OF 182
ITEMIZED DISBURSEMENTS		rate schedule(s) category of the	(check on	ly one)		
		Summary Page	215		23 28c	26 27 29 30b
Any information copied from such Reports and Stater	nents mav r	not be sold or use				
or for commercial purposes, other than using the nar						
NAME OF COMMITTEE (In Full)						
→ WOMEN SPEAK OUT PAC						
Full Name (Last, First, Middle Initial)						
A. Collins, Cayla, , ,				Date of	Disburse	ment
Mailing Address 2800 Shirlington Road				10	/ D 1	3 2022
Suite 1200						
City Arlingnton	State VA	Zip Code 22206		FEC Id	entificatio	n Number
Purpose of Disbursement	V/1	22200		С		
Travel - Mileage			: :		nsaction	ID : SB21B.43980
Candidate Name			Category/	1		Disbursement this Period
Office Sought: House Disburser	ment For:		Туре	-		90.30
Senate	Primary	General			7	7 7
President State: District:	Other (spec	cify) 🔻		✗ Me	mo Item	
Full Name (Last, First, Middle Initial)				_		
B. Amazon				Date of	Disburse	ement
				M = M		D / Y Y Y Y Y
Mailing Address PO Box 81226				10	1	3 2022
City	State	Zip Code		EEC Id	entification	n Number
Seattle Purpose of Disbursement	WA	98101			CHIMOUNO	Trumber
Phone Charger				C		17. 27.17.11.11
Candidate Name			Category/	1		ID: SB21B.43980 Disbursement this Period
Office Sought: House Disburser			Туре	-		25.67
Office Sought: House Disburser Senate	ment For: Primary	General			7	25.07
President	Other (spec			X Me	mo Item	
State: District:				- INIC	1110 110111	
Full Name (Last, First, Middle Initial) C. Amazon				Date of	Disburse	ement
Alliazoli				M = M	/ D	
Mailing Address PO Box 81226				10	1	3 2022
City	State	Zip Code		FFO Id		- Ni wala a u
Seattle	WA	98101			entification	n Number
Purpose of Disbursement Gift Card Prizes				C		
Candidate Name			Category/			ID: SB21B.4398(Disbursement this Period
			Type		Juoii	
Office Sought: House Disburser Senate	ment For: Primary	General			-	28.95
President	Other (spec			X Me	mo Ita	
State: District:				ivie	mo Item	
						0.00
SUBTOTAL of Disbursements This Page (optional)			·····•	-		0.00
TOTAL This Period (last page this line number only))					

	CHEDULE B (FEC Form 3X) EMIZED DISBURSEMENTS		urate schedule(s)			LINE I	NUMBI one)	ER:				PAG	E 57	OF	182
	LIMIZED DISBONSEMIENTS		category of the Summary Page	`	X	21b	22	2 [23			26	27		
		201404				28a	28	Bb	280		- 1	29	30k)	
	y information copied from such Reports and States for commercial purposes, other than using the nar														6
\rangle	NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC														
۹.	Full Name (Last, First, Middle Initial) Amazon Mailing Address PO Box 81226						М	e of [Disburs	sen) /		y y y 2022	■ Y	
		01-1-	7:- 01-					0		10		_	2022		
	City Seattle	State WA	Zip Code 98101				FEC	Ider	ntificati	on	Nun	nber			
	Purpose of Disbursement Gift Card Prizes		30101	_	_		С	Tran	sactio	n I	D : S	SB21E	3.43980		
	Candidate Name			Cate	egoi ype	ry/	Amo	ount o	of Eacl	h [Disbu	ırsem	ent this	-	od
	Office Sought: House Disbursel Senate President	ment For: Primary Other (spec	General				L	Mom	o Itam	_	-	_	54	1.95	_
	State: District:						X	wem	o Item	l					
3.	Full Name (Last, First, Middle Initial) Cook Out Kennesaw Mailing Address 745 Chastain Rd NW						М	of [Disburs	sen 08) /		y y 2022	Y	
	City Kennesaw	State GA	Zip Code 30144				FEC	Ider	ntificati	on	Nur	nber			
	Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	ard Purchase	e) [Cate	egoi	ry/							3.44576 ent this		od
	Office Sought: House Disbursel Senate President State: District:	ment For: Primary Other (spec	General				×	Mem	o Item		_	-	30	0.00	
С.	Full Name (Last, First, Middle Initial) Cook Out Kennesaw						M	M		- 0) /		Y	Y	
	Mailing Address 745 Chastain Rd NW						1	0		08	_		2022	-	
	•	State GA	Zip Code 30144				FEC	Ider	ntificati	on	Nun	nber			
	Kennesaw Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca			_	-	\neg	С			Ξ					
	Candidate Name			Cate	egoi	ry/	Amo						3.4457 7 ent this		od
	Office Sought: House Disbursel	ment For: Primary Other (spec	General cify) ▼		,		×	Mem	o Item			7	10).45	
s	UBTOTAL of Disbursements This Page (optional)					<u> </u>		=	7	-	÷	7		0.00	
Т	OTAL This Period (last page this line number only)							-		_	_	_	_	

SCHEDULE B (FEC Form 3X)	I le -	unda nelecció ()	FOR LI	INE NU	JMBER:			PAGI	E 58 O	F 182
ITEMIZED DISBURSEMENTS		rate schedule(s) category of the	(check	-	·			00 5		
		Summary Page		21b 28a	22 28b	23 28c		26 29	27 30b	
Any information copied from such Departs and Chatere	onte mai	not he cold or us								ione
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam										
NAME OF COMMITTEE (In Full)										
WOMEN SPEAK OUT PAC										
Full Name (Last, First, Middle Initial)					Data of	Diahuwa				
A. Cook Out Kennesaw					Date of					
Mailing Address 745 Chastain Rd NW					10	/ D)8	Y	2022	Y
City	state	Zip Code			FEC Ide	ntificatio	n Nur	nher		
110111100011	GA	30144				Titilloatio	ii ivai	11001		
Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Car	rd Purchase	;)		7	C					
Candidate Name		,				nsaction				امان ما
			Category/ Type	'	Amount	or Each	DISDI	urseme	ent this P	eriod
Office Sought: House Disbursem	nent For:					-			59.06	3
Senate	Primary	General				,		7		
	Other (spec	cify) 🔻			X Men	no Item				
State: District:										
Full Name (Last, First, Middle Initial) B. Cook Out Kennesaw					Date of	Dishure	amant			
5. Cook Out Kennesaw					M M		D		Y	V
Mailing Address 745 Chastain Rd NW					10		12	L	2022	
,	state	Zip Code			FEC Ide	ntificatio	n Nur	nber		
Kennesaw Purpose of Disbursement	GA	30144								
Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	rd Purchase	e)		7	C					
Candidate Name			Category/ Type			nsaction of Each			.44579 ent this P	'eriod
Office Sought: House Disbursem	ent For:		.,,,,						74.00	0
Senate	Primary	General						7	1.4	
	Other (spec	cify)			X Men	no Item				
State: District:										
Full Name (Last, First, Middle Initial) C. Cracker Barrel					Date of	Disburse	ement			
Mailing Address 311 Hartman Dr					10	/ D)5	Y	2022	Y
City	state	Zip Code			EEC 14-	ntificatio	n Ni	nhor		
Lebanon	TN	37087			FEC Ide	nuncatio	ıı ıvur	inet		
Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Car	rd Purchase			7	C					
Candidate Name		,,	Category/			nsaction of Each			3.4458(ent this P	'eriod
Office Sought: House Disbursem	ent For		Type	_					9.00	0
	Primary	General				7	_	7	- 45	
	Other (spec				X Men	no Item				
State: District:					iviel	.o nom				
SUBTOTAL of Disbursements This Page (optional))	•				7	0.0	0
TOTAL This Period (last page this line number only).				_						ŢĪ

	CHEDULE B (FEC Form 3X)	Use sena	rate schedule(s)	FOR LINE			PAGE 59 OF	182
T	EMIZED DISBURSEMENTS	for each of	category of the	(check only	7 one) 22	23 2	6 27	
		Detailed S	Summary Page	28a	28b	28c 2	9 30b	
	y information copied from such Reports and Statem for commercial purposes, other than using the nam							
<u> </u>	NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC	io una adare	occ of any points	ar committee is	S CONCIL CONTRIL	autorio iromi	Such commune	,
۹.	Full Name (Last, First, Middle Initial) Cracker Barrel				Date of Di	sbursement	Y Y Y	,
	Mailing Address 311 Hartman Dr				10	06	2022	
	Lebanon	State TN	Zip Code 37087			ification Num	ber	
	Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca Candidate Name	ird Purchase)	Category/		action ID : SI	B21B.44581 rsement this Pe	riod
		nent For: Primary Other (spec	☐ General	Type	X Memo	7	3.00	inou
	State: District:				Niemo	item		
3.	Full Name (Last, First, Middle Initial) Crumbl Mailing Address 2570 W 600 N				Date of Di	sbursement	Y Y Y Y Y Y 2022	1
	City	State UT	Zip Code 84042		FEC Identi	ification Num	ber	
	Lindon Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca				C			
	Candidate Name			Category/ Type		action ID : SI Each Disbur	B21B.44583 rsement this Pe	eriod
		nent For: Primary Other (spec	General				30.00	_
	State: District:				Memo	Item		
Э.	Full Name (Last, First, Middle Initial) Culvers					sbursement	Y	
	Mailing Address 1240 Water Street				10	15	2022	
	City Prairie du Sac Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	State WI ard Purchase	Zip Code 53578		C	ification Num		
	Candidate Name			Category/ Type		action ID : Si Each Disbur	B21B.44584 rsement this Pe	eriod
		nent For: Primary Other (spec	General ify) ▼	71	X Memo	Item	109.09	
s	UBTOTAL of Disbursements This Page (optional)			>		7	0.00	
Т	OTAL This Period (last page this line number only)							\Box

ľ

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 28a	7 one) 22 23 26 27 28b 28c 29 30b
Any information copied from such Reports and State or for commercial purposes, other than using the na			
NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC			
Full Name (Last, First, Middle Initial) A. CVS			Date of Disbursement
Mailing Address 1 CVS Dr			10 05 2022
City Woonsocket	State Zip Code RI 02895		FEC Identification Number
Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit C Candidate Name	Card Purchase)	Catagony	Transaction ID : SB21B.44586 Amount of Each Disbursement this Period
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)	Category/ Type	22.79
State: District:	Other (specify)		✗ Memo Item
Full Name (Last, First, Middle Initial) B. Dairies Coffee			Date of Disbursement
Mailing Address 777 Memorial Drive			10 11 2022
City Atlanta Purpose of Disbursement Food/Payarana (9/16/99 Usia Isa Pransid Dahit G	State Zip Code GA 30316		FEC Identification Number
Food/Beverage (9/16/22 Usio Inc. Prepaid Debit C Candidate Name	card Purchase)	Category/ Type	Transaction ID : SB21B.44588 Amount of Each Disbursement this Period
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)		30.00 X Memo Item
Full Name (Last, First, Middle Initial) C. Dairies Coffee			Date of Disbursement
Mailing Address 777 Memorial Drive			10 11 2022
City Atlanta Purpose of Disbursement	State Zip Code GA 30316		FEC Identification Number
Food/Beverage (9/16/22 Usio Inc. Prepaid Debit C Candidate Name	Card Purchase)	Category/ Type	Transaction ID: SB21B.44589 Amount of Each Disbursement this Period
Senate President	ement For: Primary		39.03 X Memo Item
State: District:			_
SUBTOTAL of Disbursements This Page (optional). TOTAL This Period (last page this line number only			0.00

S П

S	CHEDULE B (FEC Form 3X)	FOR LINE					IE NUMBER: PAGE 61 OF 182							
IT	EMIZED DISBURSEMENTS		rate schedule(s) category of the	(ch	neck	•	′		٦.00		00			
			Summary Page			21b 28a	22 28b		23 28c	\vdash	26 29	27 30b		
	ny information copied from such Reports and Staten	nents may n	ot he sold or use	ed by a				nur		of so			tions	
	for commercial purposes, other than using the name													
	NAME OF COMMITTEE (In Full)													
$ \rangle$	WOMEN SPEAK OUT PAC													
\angle	Full Name (Last, First, Middle Initial)													
Α.							Date of Disbursement							
							M	1 /	D	D	/ Y	YY	Υ	
	Mailing Address 1900 K Street NW						10	ш	0	7	L	2022		
	City	Stato	Zin Codo											
	City Swashington	State DC	Zip Code 20006		FEC Identification Number									
	Purpose of Disbursement			С										
	Legal Fees					Ш		ans	action	ID:	SB21E	3.44489		
	Candidate Name			Cate		<i>-</i>	Amour	nt of	Each	Disb	ursem	ent this f	Period	
	Office Sought: House Disbursen	nent For		Ту	pe	-						10290.0	0	
	Senate	Primary	General						7	_	7	1 40		
	President	Other (speci		М	emo	Item								
	State: District:						ш							
В.	Full Name (Last, First, Middle Initial)						Doto	st Di	oburoo	man				
Ь.	Doordash						Date of Disbursement							
	Mailing Address 303 2nd St, Suite 800						10 07 2022							
	City San Francisco	State CA	Zip Code 94107				FEC Id	denti	fication	n Nu	mber			
	Purpose of Disbursement		94107			_	Transaction ID : SB21B.44591 Amount of Each Disbursement this Period							
	Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	ard Purchase)	1:		Ш								
	Candidate Name			Cate		,								
	Office Sought: House Disbursen	nont For:		Ту	ре		97.47							
	Senate Dispulser	Primary	General					07						
	President	Other (speci	ify)				X Memo Item							
	State: District:						IVI	emo	пеш					
_	Full Name (Last, First, Middle Initial)						5 .							
C.	Doordash						Date o	וט זמ		_			_	
	Mailing Address 303 2nd St, Suite 800						10	' '	07		/ Y	2022	Y	
		State CA	Zip Code				FEC Id	denti	fication	n Nu	mber			
	San Francisco Purpose of Disbursement	CA	94107			_	С		-		-	-		
	Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	rd Purchase))			Ш		ans	action	ID ·	SR21F	3.44592		
	Candidate Name			Cate	gory/	,	Amount of Each Disbursement this Period							
	Office Cought: House Bishows	nont Fam		Ту	ре	_	34.13							
	Office Sought: House Disburser Senate	ement For: Primary General											<u> </u>	
	President	Other (specify) ▼					✗ Memo Item							
_	State: District:						IVI	emo	itelli					
									-			40000	20	
5	SUBTOTAL of Disbursements This Page (optional))	<u> </u>		_			7	10290.0	JU	
,	TOTAL This Period (last page this line number only)												-	
1 '	relies (last page the mie hamber only)					_		_						

SCHEDULE B (FEC Form 3X)	11	and a street to the	LINE NUMBER: PAGE 62 OF 182								
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the	nly one)		00 -		, –				
		Summary Page	X 21 28			23 28c	26		27 30b		
Any information copied from such Beneric and Cities	monto moss	not be sold or									
Any information copied from such Reports and State or for commercial purposes, other than using the nar											
NAME OF COMMITTEE (In Full)											
WOMEN SPEAK OUT PAC											
Full Name (Last, First, Middle Initial)				5.	, D: 1						
A. Doordash				Date	of Disk	oursem	_				
Mailing Address 303 2nd St, Suite 800				10	И /	09) /		2022	Y	
City	State	Zip Code		EEC I	FEC Identification Number						
San Francisco	CA	94107			aomini	Jation	TVOITE	,01	-		
Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	ard Purchase	e)									
Candidate Name		,				tion II	_			اماناما	
			Category/ Type	Amoul	nt of E	acn D	rsburs	semer	nt this P	erioa	
Office Sought: House Disburse	ment For:	I		- -				_	36.25	5	
Senate	Primary	General					,				
President	Other (spe	cify) ▼		X M	emo It	tem					
State: District:											
Full Name (Last, First, Middle Initial) B. Doordash				Date	of Disk	oursem	nent				
Doordasii				M = 1		D D	_	Υ	Y	Y	
Mailing Address 303 2nd St, Suite 800		10 09 2022									
,	State	Zip Code	FEC I	dentific	cation	Numb	er				
San Francisco Purpose of Disbursement	CA	94107		C							
Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	ard Purchas	e)									
Candidate Name			Category/ Type		44594 nt this P	eriod					
Office Sought: House Disburse	ment For:			∃ Ⅰ			10.14	4			
Senate	Primary	General			,		,				
State: District:	Other (spe	cify)		X M	emo It	tem					
Full Name (Last, First, Middle Initial)				+-							
C. Doordash				Date of		oursem		V	Y	V	
Mailing Address 303 2nd St, Suite 800				10		09			2022		
,	State	Zip Code		FEC I	dentific	cation	Numb	er			
San Francisco Purpose of Disbursement	CA	94107			-	_	-	_	-		
Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	ard Purchase	e)							14555		
Candidate Name			Category/ Type			etion II Each D			4459t nt this P	eriod	
Office Sought: House Disburse	ment For:	I							35.00)	
Senate	Primary	General									
President Pietriet:	Other (spe	cify) 🔻		X Memo Item							
State: District:											
SUBTOTAL of Disbursements This Page (optional)			·····•						0.0	0	
TOTAL This Period (last page this line number only)									\Box	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate sche		FOR LINE I		PAGE 63 OF 182					
ILMIZED DISBUNSEMIS	for each category Detailed Summary		21b 28a	28b 28c 29 30b						
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam										
NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC		., pointout			2.2.15 50011 55111111105.					
Full Name (Last, First, Middle Initial) A. Doster, Micah, , ,				Date of Dis	sbursement					
Mailing Address 2800 Shirlington Road Suite 1200				10 03 2022 FEC Identification Number						
City Arlington Purpose of Disbursement	State Zip Cod VA 22206									
Travel / Food/Beverage / Gift Card Prizes (Partial B Candidate Name	Below Threshold)	[Category/	Transaction ID : SB21B.43939 Amount of Each Disbursement this Period						
President		eneral	Туре	Memo	488.07 Item					
State: District: Full Name (Last, First, Middle Initial) B. Doster, Micah, , ,				Date of Dis	sbursement					
Mailing Address 2800 Shirlington Road Suite 1200				10 03 2022						
City Arlington Purpose of Disbursement	State Zip Cod VA 22206		FEC Identif	ication Number						
Travel - Mileage Candidate Name	Category/ Type ment For: Primary General Other (specify)			Transaction ID : SB21B.43939 Amount of Each Disbursement this Pe						
				X Memo	376.25 Item					
Full Name (Last, First, Middle Initial) C. Doster, Micah, , ,				Date of Dis	sbursement					
Mailing Address 2800 Shirlington Road Suite 1200				10	13 2022					
Arlington Purpose of Disbursement Travel / Food/Beverage	State Zip Cod VA 22206			С	ication Number					
Candidate Name			Category/ Type		Each Disbursement this Period					
Office Sought: House Senate President State: Disbursen		eneral		Memo	238.83 Item					
SUBTOTAL of Disbursements This Page (optional)			>		726.90					
TOTAL This Period (last page this line number only)										

SCHEDULE B (FEC Form 3X)			FOR LIN	NE NUMBER: PAGE 64 OF 182									
ITEMIZED DISBURSEMENTS		parate schedule(s) n category of the	(check o				.=						
		Summary Page	X 21		23 28c		27 30b						
Any information popular from such Departs and Cha													
Any information copied from such Reports and State or for commercial purposes, other than using the results of the such as the													
NAME OF COMMITTEE (In Full)													
WOMEN SPEAK OUT PAC													
Full Name (Last, First, Middle Initial)				Data	f Diabura	am a m t							
A. Doster, Micah, , ,				Date C	of Disburse		Y						
Mailing Address 2800 Shirlington Road Suite 1200				10	1	3 2022	2						
City	State	Zip Code			FEC Identification Number								
Arlington	VA	22206		FEC Id	dentificatio	n Number	_						
Purpose of Disbursement				C									
Travel / Mileage					ansaction	ID : SB21B.441	32						
Candidate Name			Category/	Amour	nt of Each	Disbursement th	nis Period						
Office Sought: House Disbur	sement For:		Туре			20	00.01						
Senate	Primary	General			7	7	4						
President	Other (sp			Momo Itom									
State: District:				★ Memo Item									
Full Name (Last, First, Middle Initial)													
B. Downing, Marlene, , ,				Date o	of Disburse	ement							
Mailing Address 2000 Otto				M = M		D / Y Y							
Mailing Address 2800 Shirlington Road				10	10 13 2022								
City	State	Zip Code		FEC Id	dentificatio	n Number							
Arlington Purpose of Disbursement	VA	22206					7						
Travel / Mileage				C									
Candidate Name			Category/	Transaction ID: SB21B.44130 Amount of Each Disbursement this Per									
			Type		Amount of Each bisbursement this Fore								
	sement For:					45	53.14						
Senate	Primary	General											
President State: District:	Other (sp	ecity)		Me	emo Item								
Full Name (Last, First, Middle Initial)													
C. Dunkin				Date o	of Disburse	ement							
				M = M	/ D								
Mailing Address 130 Royall Street				10	0	8 2022	2						
City	State	Zip Code		FF0.1	1 4161 41 -	. Nii.							
Canton	MA	02021		FEC IC	dentificatio	n Number	_						
Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit	Card Purcha	se)		C									
Candidate Name			Catagory	Transaction ID : SB21B.44597 Amount of Each Disbursement this Period									
			Category/ Type	Amount of Each Dispulsement this Fellou									
Office Sought: House Disbur	sement For:		<u> </u>	39.55									
Senate	Primary	General				,							
President	Other (sp	ecify) \blacktriangledown		X Me	emo Item								
State: District:													
SUBTOTAL of Disbursements This Page (optional	I)		_			4	53.14						
ODITIAL OF DISDUISEMENTS THIS Page (optional			·····	-	17	7							
TOTAL This Period (last page this line number of	nlv)												

	CHEDULE B (FEC Form 3X)	Use sepa	rate schedule(s)	FOR LINE I			PAGE 65 OF	182
	EMIZED DISBURSEMENTS	for each of	category of the Summary Page	21b	22	23 2	26 27	
				28a	28b	28c 2	29 30b	
	ly information copied from such Reports and Statem for commercial purposes, other than using the name							
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC							
۹.	Full Name (Last, First, Middle Initial) Dunkin				Date of Di	sbursement	Y Y Y	
	Mailing Address 130 Royall Street				10	08	2022	
	Canton	State MA	Zip Code 02021			fication Num	nber	
	Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca Candidate Name	rd Purchase)				SB21B.44598	
	Office Sought: House Disbursem	nent For:		Category/ Type	Amount of	Each Disbu	ursement this Pe	-
	President	Primary Other (spec	General ify) ▼		X Memo	Item	7-1-2-	
3.	Full Name (Last, First, Middle Initial) Dunkin				Date of Di	sbursement	Y Y Y Y Y	
	Mailing Address 130 Royall Street				10	08	2022	
	,	State MA	Zip Code 02021		FEC Identi	fication Nun	nber	
	Canton Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca				С			
	Candidate Name			Category/ Type			BB21B.44599 ursement this Pe	eriod
		Primary	General				9.21	
	State: President District:	Other (spec	ify)		X Memo	Item		
С.	Full Name (Last, First, Middle Initial) Dunkin				Date of Di	sbursement		
	Mailing Address 130 Royall Street				10	09	2022	
	,	State MA	Zip Code 02021			fication Num	nber	
	Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Cal Candidate Name	rd Purchase)	Category/			SB21B.4460(ursement this Pe	eriod
	Office Sought: House Disbursem	nont For		Type			85.38	
	Senate	Primary Other (spec	General ▼		X Memo	Item	00.00	
	State: District:				Ц			
S	UBTOTAL of Disbursements This Page (optional)			·····•			0.00	
Т	OTAL This Period (last page this line number only).							

S П

SCHEDULE B (FEC Form 3X)			INE NUMBER: PAGE 66 OF 182										
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the	(check o			00		۰. ۲					
		Summary Page	X 21			23 28c		26 29	27 30b				
Any information copied from such Reports and State	ments may i	not he sold or us								nne			
or for commercial purposes, other than using the na													
NAME OF COMMITTEE (In Full)													
│													
Full Name (Last, First, Middle Initial)					1								
A. Dunkin				Date	of Dis	burse	ment						
					M /	D			Y Y Y				
Mailing Address 130 Royall Street				10		14	+		2022	_			
City	State	Zip Code		FEC	FEC Identification Number								
Canton Purpose of Disbursement	MA	02021											
Food/Beverage (9/16/22 Usio Inc. Prepaid Debit C	Card Purchase	e)											
Candidate Name			Category/					SB21B. urseme	. 44601 Int this Po	eriod			
			Туре		-	_	_	-	74.40				
Office Sought: House Disburse Senate	ement For: Primary	General					_		74.10				
President	Other (spec			X N	lemo I	ltom							
State: District:				l lv	leilio i	ILEIII							
Full Name (Last, First, Middle Initial)				Data	- (D:-	l							
B. EAN Services LLC				Date	Date of Disbursement								
Mailing Address PO Box 402383				10	10 07 2022								
-		T=: 0 :		FEC Identification Number									
City Atlanta	State GA	Zip Code 30384		FEC	dentifi	ication	Nun	nber					
Purpose of Disbursement				С									
Travel / Rental Cars					ransad	ction	ID : S	B21B.	44486				
Candidate Name			Category/ Type	Amou	nt of E	Each	Disbu	ırseme	nt this Po	eriod			
Office Sought: House Disburse	ement For:		1,00	1101.15									
Senate	Primary	General			7 7 7								
President State: District:	Other (spec	cify)		N	Memo Item								
Full Name (Last, First, Middle Initial)													
C. EAN Services LLC				Date	of Dis	burse	ment						
Mailing Address DO Day 400000				10		07			2022				
Mailing Address PO Box 402383				10		U/			2022	_			
City	State	Zip Code		FEC	dentifi	ication	Nun	nber					
Atlanta Purpose of Disbursement	GA	30384			-	_	_		-				
Travel / Rental Cars					ranea	ction	ID · S	\$B21B	11185				
Candidate Name			Category/	Transaction ID : SB21B.44488 Amount of Each Disbursement this Period									
Office Sought: House Disburse	ement For:		Туре	1422.12									
Senate Disbuise	Primary	4 4						-					
President	Other (spec	l n	lemo I	Item									
State: District:				_ L									
SUBTOTAL of Disbursements This Page (optional)									2523.2	7			
COSTOTAL OF DISDUISEMENTS THIS Fage (optional)	•••••		······	-	+		÷	7	1 46	=			
TOTAL This Period (last page this line number only	y)		·····			,		,					

SCHEDULE B (FEC Form 3X)			INE NUMBER: PAGE 67 OF 182										
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the	only one)		1 00								
		Summary Page		1b 22 8a 28l	, -	23 28c	26	27 30b					
Any information copied from such Reports and State	monto mov	not be cold or use											
or for commercial purposes, other than using the na													
NAME OF COMMITTEE (In Full)													
WOMEN SPEAK OUT PAC													
Full Name (Last, First, Middle Initial)				Data	-4 D:								
A. Ewing, Mollie, , ,				Date	OI DI	sburse		/	V				
Mailing Address 2800 Shirlington Road Suite 1200				10	10 13 2022								
City	State	Zip Code		FFO	lala aki	C: 4:	NI. waala a						
Arlington	VA	22206		FEC	identi	rication	Number	r					
Purpose of Disbursement Travel / Food/Beverage													
Candidate Name] —	ransa	ction	ID : SB2	1B.44151					
Candidate Name			Category/ Type	Amo	unt of	Each	Disburse	ment this P	'eriod				
Office Sought: House Disburse	ment For:		1,700					165.38	В				
Senate	Primary	General			7 7								
President	Other (spe	ecify) 🔻		1	Лето	Item							
State: District: Full Name (Last, First, Middle Initial)													
B. Chick-fil-a				Date	of Di	sburse	ment						
Offick-fil-a				M	M /	D		/	Υ				
Mailing Address 5200 Buffington Rd.				1	10 13 2022								
City	State	Zip Code		FEC	Identi	fication	Number	r					
Atlanta Purpose of Disbursement	GA	30349											
Food/Beverage				1D 44454									
Candidate Name			Category/	_	1B.44151 ment this P	eriod							
			Type		_			40.00					
Office Sought: House Disburse Senate	ment For:	Ganaral				, .		18.90	J				
President	Primary Other (spe	General ecify)		34									
State: District:	(-1	, ,		X 1	Memo	Item							
Full Name (Last, First, Middle Initial)													
C. Ewing, Mollie, , ,						sburse							
Mailing Address 2800 Shirlington Road				M 10		13		2022	Y				
Suite 1200													
	State VA	Zip Code		FEC	Identi	fication	Number	r					
Arlington Purpose of Disbursement		22206		C									
Travel / Mileage					Franc:	ection	ID · SR2	1B.44151					
Candidate Name			Category/ Type		Amount of Each Disbursement this Period								
Office Sought: House Disburse	ment For:	104.76											
Senate	Primary	General		100									
President	Other (spe			×	4	14							
State: District:					Memo	nem_							
					-	-							
SUBTOTAL of Disbursements This Page (optional).)	<u> </u>	_			165.3	,δ				
TOTAL This Period (last page this line number only)												

S	CHEDULE B (FEC Form 3X)			EOD III	NE NUMBER: PAGE 68 OF 182							
	EMIZED DISBURSEMENTS		arate schedule(s)	1 -	only one)							
. 1			category of the Summary Page	` X 21	b 22 23 2	26 27						
		Dotalled		28	a 28b 28c 2	29 30b						
	y information copied from such Reports and Stater for commercial purposes, other than using the nar											
\setminus	NAME OF COMMITTEE (In Full)											
\geq	WOMEN SPEAK OUT PAC											
_	Full Name (Last, First, Middle Initial)				Date of Disbursement							
Α.	Exxonmobil				Date of Disbursement							
	Mailing Address 5959 Las Colinas Boulevard				10 07	2022						
	City	State	Zip Code		FEC Identification Number							
	Irving	TX	75039		FEC Identification Number							
	Purpose of Disbursement Travel (9/16/22 Usio Inc. Prepaid Debit Card Purch	ase)										
	Candidate Name				Transaction ID : S							
	Candidate Name			Category/ Type	Amount of Each Disbu	rsement this Period						
	Office Sought: House Disburser	ment For:		1,700	-	28.67						
	Senate	Primary	General		7	<u> </u>						
	President	Other (spec	cify) ▼		★ Memo Item							
_	State: District:				<u> </u>							
_	Full Name (Last, First, Middle Initial)				Pate of Pick							
B.	Fadool, David, , ,				Date of Disbursement							
	Mailing Address 2800 Shirlington Road, Ste 1200				10 03	2022						
	Maining / Rear 2000 Shiffington Road, Ste 1200				10 00	2022						
	City	State	Zip Code		FEC Identification Num							
	Arlington	VA	22206									
	Purpose of Disbursement Travel / Food/Beverage (Partial Below Threshold)				Transaction ID: SB21B.43792 Amount of Each Disbursement this Period							
	Candidate Name											
				Category/ Type								
	Office Sought: House Disburser	ment For:	I		 	102.92						
	Senate	Primary	General									
	President	Other (spec	cify)		Memo Item							
_	State: District:											
_	Full Name (Last, First, Middle Initial)				Date of Disbursement							
٥.	Fadool, David, , ,				M M / D D /	YYYY						
	Mailing Address 2800 Shirlington Road, Ste 1200				10 03	2022						
	City	State	Zip Code		FEC Identification Num	nhor.						
	Arlington	VA	22206			IDEI						
	Purpose of Disbursement Mileage											
	Candidate Name				Transaction ID : SB21B.43792							
	Candidate Name			Category/ Type	Amount of Each Disbursement this Period							
	Office Sought: House Disburser	ment For:		Type	92.40							
	Senate	Primary	General									
	President	Other (spec	cify) ▼		X Memo Item							
_	State: District:											
						102.02						
S	UBTOTAL of Disbursements This Page (optional)			······		102.92						
_	OTAL This Period (last page this line number only))										
		,										

Use separate schedule(s) Creact only one) Created by any one of the character of the commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) Create only one) Create one of solicits contributions from such committee. NAME OF COMMITTEE (in Full) Create one) Create one of solicits contributions from such committee. NAME OF COMMITTEE (in Full) Create one of solicits contributions from such committee. NAME OF COMMITTEE (in Full) Create one of solicits contributions from such committee. NAME OF COMMITTEE (in Full) Create one of solicits contributions from such committee. NAME OF COMMITTEE (in Full) Create one of solicits contributions from such committee. NAME OF COMMITTEE (in Full) Create one of solicits contributions from such committee. NAME OF COMMITTEE (in Full) Create one of solicits contributions from such committee. NAME OF COMMITTEE (in Full) Create one of solicits contributions from such committee. NAME OF COMMITTEE (in Full) Create one of solicits contributions from such committee. Purpose of Disbursement Create one of solicits contributions from such committee. Purpose of Disbursement Create one of solicits contributions from such committee. Purpose of Disbursement Create one of solicits contributions from such committee. Purpose of Disbursement Create one of solicits contributions from such committee. Purpose of Disbursement Create one of solicits contributions from such committee. Purpose of Disbursement Create one of solicits contributions from such committee. Purpose of Disbursement Create one of solicits contributions from such contributions from such contributions from such con	50	CHEDULE B (FEC Form 3X)	llee		LINE NUMBER: PAGE 69 OF 182								
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committees. NAME OF COMMITTEE (in Full) WOMEN SPEAK OUT PAC Full Name (Last, First, Middle Initial) A. Fadool, David, , ,	ΙT	EMIZED DISBURSEMENTS		-				nc					
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC Full Name (Last, First, Middle Initial) A. Fadool, David, , ,									Ш	L			
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) WOMEN SPEAK OUT PAC Full Name (Last, First, Middle Initial) A. FadOol, David, , , Melling Address 2800 Shirfington Road, Ste 1200 City Arlington VA 22206 City Candidate Name Candidate Name Citics Sought: Full Name (Last, First, Middle Initial) B. FFP Melling Address 841 Parkview St City Cutswille City C	Δ	by information copied from such Deports and Chater	l nonto mass =	not he cold or								iono	
Full Name (Last, First, Middle Initial) A. FadOol, David, , , Malling Address 2800 Shirfington Road, Ste 1200 City State Zip Code Arrington VA 22206 Purpose of Disbursement Travel - Mileage Candidate Name Collegory' Special Primary General Other (spocity) ▼ Malling Address 841 Parkview St Collegory' Transaction ID : S8218.43991 Anount of Each Disbursement this Period Other (spocity) ▼ Fell Name (Last, First, Middle Initial) B. FFP Malling Address 841 Parkview St Collegory' Transaction ID : S8218.44604 Anount of Each Disbursement this Period Other (spocity) ▼ Fell Name (Initial) Collegory' Transaction ID : S8218.44604 Anount of Each Disbursement this Period Other (spocity) ▼ Malling Address 841 Parkview St Collegory' Transaction ID : S8218.44604 Anount of Each Disbursement Travel (9/18/22 Usio Inc. Prepaid Debit Card Purchase) Crandidate Name City Jacksonville President State: District Fell Name (Last, First, Middle Initial) City Sanate President State: District Fell Name (Last, First, Middle Initial) City Sanate President State: District Fell Name (Last, First, Middle Initial) City Sanate President State: District Fell Name (Last, First, Middle Initial) City Sanate President State: District Fell Name (Last, First, Middle Initial) City Sanate President State: District Fell Name (Last, First, Middle Initial) City Sanate President State: District Fell Name (Last, First, Middle Initial) City Sanate President State: District Fell Name (Last, First, Middle Initial) City Sanate President State: District Fell Name (Last, First, Middle Initial) Transaction ID : S8218.4460t Amount of Each Disbursement Initial Primary General Travel State: District Transaction ID : S8218.4460t Amount of Each Disbursement Initial Primary General Travel State: District Transaction ID : S8218.4460t Transaction ID : S8218													
Full Name (Last, First, Middle Initial) A. Fadool, David, , ,	\setminus	NAME OF COMMITTEE (In Full)											
A. Fadool, David, , , Mailing Address 2800 Shirington Road, Ste 1200 City	\geq	WOMEN SPEAK OUT PAC											
City State	_						D-1 (D:-1					
Mailing Address 2800 Shirington Road, Ste 1200	Α.	Fadool, David, , ,											
Adingon Purpose of Disbursement Travel - Mileage Candidate Name Category/ Type Office Sought:		Mailing Address 2800 Shirlington Road, Ste 1200								Y		Y	
Arington Purpose of Disbursement Travel - Mileage Candidate Name Office Sought: House		City	State	Zip Code			FEC Identification Number						
Travel - Mileage Candidate Name Category/ Office Sought:			VA	22206				Titilloatio	1 I I I I I	1001	-		
Candidate Name Office Sought:		•				7	C						
Office Sought:									_			اماندا	
Office Sought:						/	Amount	or Each	DISDU	irseme	ent this P	rerioa	
State: District: Other (specify) ▼ Memo Item		Office Sought: House Disbursen	nent For:						_		108.8	5	
State: District: Full Name (Last, First, Middle Initial) B. FFP Mailing Address 841 Parkview St City Louisville Purpose of Disbursement Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Firehouse Subs Mailing Address 12735 Gran Bay Parkway City Jacksonville Purpose of Disbursement State: District: Full Name (Last, First, Middle Initial) C. Firehouse Subs Mailing Address 12735 Gran Bay Parkway City Jacksonville Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type FEC Identification Number Category/ Type Date of Disbursement Date of Disbursement Fold Mailing Address 12735 Gran Bay Parkway FEC Identification Number Category/ Type Office Sought: House Disbursement For: Senate Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Office Sought: House Disbursement For: Senate President Other (specify) Senate President Other (specify) Memo Item Substract Other (specify) Memo Item Main / 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		Senate	Primary	General						,			
Full Name (Last, First, Middle Initial) B. FFP Mailing Address 841 Parkview St City Louisville Purpose of Disbursement Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Candidate Name Disbursement For: Senate President President State: District: City Louisville Candidate Name Disbursement For: Senate Primary General Other (specify) Date of Disbursement FC Identification Number Category/ Type FEC Identification ID: SB218.44604 Amount of Each Disbursement this Period Full Name (Last, First, Middle Initial) C. Firehouse Subs Mailing Address 12735 Gran Bay Parkway City Jacksonville Purpose of Disbursement FoodBeverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Office Sought: President FoodBeverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type General Other (specify) Memo Item FEC Identification Number Category/ Type FEC Identification Number FEC Identification Number Category/ Type General Other (specify) Memo Item FIGURE Sought: Memo Item FIGURE Sought: Memo Item FIGURE Sought: Memo Item FIGURE Sought: Memo Item 108.85			Other (spec	eify) 🔻			Men	no Item					
Mailing Address 841 Parkview St City	_												
Mailing Address 841 Parkview St City Louisville Purpose of Disbursement Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Office Sought: President State: District: Full Name (Last, First, Middle Initial) C: Firehouse Subs Mailing Address 841 Parkview St District: Full Name (Last, First, Middle Initial) C: Firehouse Subs Mailing Address 841 Parkview St District: Date of Disbursement Fill Name (Last, First, Middle Initial) C: Firehouse Subs Mailing Address 841 Parkview St District: District: Full Name (Last, First, Middle Initial) C: Firehouse Subs Mailing Address 12735 Gran Bay Parkway FEC Identification Number Category/ Type Category/ Type Category/ Type Office Sought: House Disbursement For: Category/ Type Office Sought: Disbursement For: Senate President Other (specify) ▼ Memo Item Substruct: Substruct: Substruct: Substruct: District: Name (Anount of Each Disbursement Inis Period) FEC Identification Number Category/ Type Category/ Type Other (specify) ▼ Memo Item 108.85	R	,					Date of	Diehurea	ment				
Mailing Address 841 Parkview St City Louisville Purpose of Disbursement Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Office Sought: President State: District: Full Name (Last, First, Middle Initial) C. Firehouse Subs Mailing Address 12735 Gran Bay Parkway City Jacksonville Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Category/ Type Date of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Office Sought: House Senate Primary General Date of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type FEC Identification Number FEC Identification Number Category/ Type FEC Identification Number Category/ Transaction ID : SB21B.4460: Amount of Each Disbursement this Period FEC Identification Number Category/ Type FEC Identification Number Category/ Transaction ID : SB21B.4460: Amount of Each Disbursement this Period FEC Identification Number Category/ Type FEC Identification Number Category/ Transaction ID : SB21B.4460: Amount of Each Disbursement this Period FEC Identification Number Category/ Transaction ID : SB21B.4460: Amount of Each Disbursement this Period FEC Identification Number Category/ Type FEC Identification Number Category/ Type FEC Identification Number Category/ Type FEC Identification Number Manual of Each Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Transaction ID : SB21B.4460: Amount of Each Disbursement this Period FEC Identification Number Category/ Type Type FEC Identification Number Amount of Each Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Transaction ID : SB21B.4460: Amount of Each Disbursement this Period Transaction ID : SB21B.4460: Amount of Each Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Transaction ID : SB21B.4460: Amount of Each Disbursement this Period Transaction ID : SB21B.4460: Amount of Each D	٥.	rre								V	V V	V	
Louisville Purpose of Disbursement Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Category/ Type Category/ Type Category/ Type Category/ Type Category/ Type Category/ Type Full Name (Last, First, Middle Initial) C. Firehouse Subs Mailing Address 12735 Gran Bay Parkway City Jacksonville Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Date of Disbursement Firehouse Subs File State Category/ Type File Initiation Number Category/ Type File Identification Number # Memo Item File Identification Number # Memo Item File Identification Number Category/ Type File Identification Number File Identification ID: \$B218.44604 Amount of Each Disbursement Category/ Type Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼ Memo Item File Identification Number Category/ Type Transaction ID: \$B218.44604 Amount of Each Disbursement this Period Transaction ID: \$B218.44604 Amount of Each Disbursement For: Senate Primary General Other (specify) ▼ Memo Item # Memo Item File Identification Number File Identification Number File Identification Ident		Mailing Address 841 Parkview St						L					
Disbursement Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Office Sought: House Senate President Disbursement For: State: District: Full Name (Last, First, Middle Initial) C. Firehouse Subs Mailing Address 12735 Gran Bay Parkway City Jacksonville Purpose of Disbursement For: Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Date of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Office Sought: House Primary General Other (specify) ▼ State: District: District: Primary General Other (specify) ▼ Substate: District: Substate:		City		1 '			FEC Ide	ntification	n Num	nber			
Travel (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Category/ Type Office Sought:			СО	80027							-		
Category/ Type Office Sought: House Senate Primary General Primary General Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Firehouse Subs Mailing Address 12735 Gran Bay Parkway City State Zip Code Jacksonville FL 32258 Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Category/ Type Transaction ID: SB21B.44608 Amount of Each Disbursement this Period FEC Identification Number Category/ Type Office Sought: House Disbursement For: 66.79 Senate Primary General Other (specify) State: District: SUBTOTAL of Disbursements This Page (optional)		•	ase)		7								
Office Sought:		Candidate Name				/							
State: District: Full Name (Last, First, Middle Initial) C. Firehouse Subs Mailing Address 12735 Gran Bay Parkway City Jacksonville Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Office Sought: House Primary Office Sought: District: Senate Primary Other (specify) Memo Item FEC Identification Number Category/ Type Office Sough: House Primary General Other (specify) State: District: Memo Item Memo Item FEC Identification Number Category/ Type Other (specify) Memo Item		Office Sought: House Disbursen	nent For:		.,,,,					40.00	0		
State: District: Full Name (Last, First, Middle Initial) C. Firehouse Subs Mailing Address 12735 Gran Bay Parkway City Jacksonville Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) State: District: Substotal of Disbursements This Page (optional)		Senate	Primary	General				4		-	1 4		
Full Name (Last, First, Middle Initial) C. Firehouse Subs Mailing Address 12735 Gran Bay Parkway City Jacksonville Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Category/ Office Sought: House President State: District: Substortal of Disbursements This Page (optional)			Other (spec	eify)				no Item					
Mailing Address 12735 Gran Bay Parkway City Jacksonville Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Office Sought: House President State: District: District: Date of Disbursement FEC Identification Number Category/ Type Category/ Type FEC Identification Number Category/ Type FEC Identification Number Category/ Type FEC Identification Number Category/ Type Memon Item 108.85	_												
Mailing Address 12735 Gran Bay Parkway 10	C.	,					Date of	Disburse	ment				
Jacksonville Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Category/ Type Office Sought: House Senate Primary General Primary General Other (specify) ▼ State: District: Substruct: Memo Item 108.85		Mailing Address 12735 Gran Bay Parkway								Y		Y	
Jacksonville Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Category/ Type Office Sought: House Senate Primary General Primary General Other (specify) ▼ State: District: Substruct: Memo Item FE Identification Number Category/ Type Transaction ID: SB21B.4460€ Amount of Each Disbursement this Period X Memo Item 108.85		City	State	Zip Code			EEC Ida	ntification	n Nur	nher			
Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Category/ Type Office Sought: House Senate Primary General President Other (specify) State: District: Substrict: Memo Item 108.85		Jacksonville	FL	32258				minicatiol	I INUII	ın c ı	-		
Candidate Name Category/ Type Office Sought: House Senate Primary General President Other (specify) ▼ State: District: Transaction ID: SB21B.4460€ Amount of Each Disbursement this Period Fresident Other (specify) ▼ Memo Item 108.85		a Prant and the state of the st	rd Purchase)		7							
Office Sought: House Disbursement For: Senate Primary General President Other (specify) ▼ Subtrotal of Disbursements This Page (optional)		,		,		/						eriod	
Senate Primary General Other (specify) State: District: Memo Item Subtrotal of Disbursements This Page (optional)		Office Sought: House Dishursen	nent For		rype	-					66.79	9	
State: District: Memo Item SUBTOTAL of Disbursements This Page (optional)				General				7		7	1 45		
State: District: SUBTOTAL of Disbursements This Page (optional)		President	Other (spec	cify) 🔻		X Memo Item							
GODITOTAL OF DISDUISCITION IN 1 age (optional)		State: District:					L IVIOII		_				
TOTAL This Period (last page this line number only).	s	UBTOTAL of Disbursements This Page (optional)				•		-		7	108.8	5	
I I I I I I I I I I I I I I I I I I I	ļ	OTAL This Period (last name this line number only)				_							

SCHEDULE B (FEC Form 3X)	I le e	under nicht auf 1. ()	INE NUMBER: PAGE 70 OF 182								
ITEMIZED DISBURSEMENTS		rate schedule(s) category of the	(check o	·				_			
		Summary Page	X 21		, -	23 28c	2	L	27 30b		
Any information copied from such Departs and Statem	onte may a	not he cold or us								ione	
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam											
NAME OF COMMITTEE (In Full)											
WOMEN SPEAK OUT PAC											
Full Name (Last, First, Middle Initial)				Doto	of D	iohuroor	mont				
A. Five Guys				Date	טו ט	isburser					
Mailing Address 10718 Richmond Highway				1	o ^M '	09			2022	Y	
Unit D											
,	state VA	Zip Code		FEC	Ident	ification	Num	ber			
Lorton Purpose of Disbursement	VA	22079							7.7		
Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Car	rd Purchase	e)					ID 0	D04 D	11000		
Candidate Name			Category/			action Each	_		nt this P	eriod	
			Type		_		-	_		-	
Office Sought: House Disbursem		Camaral				7			39.2	4	
	Primary Other (spec	General									
State: District:	oulor (opoc	, y /, ∀		×	Memo	Item					
Full Name (Last, First, Middle Initial)											
B. Fox Bros Bbq				Date	of D	isburser	ment				
A4 37 A 4 4					M /	D			Y Y	Y	
Mailing Address 1238 Dekalb Ave NE					Ü	05)	-	2022		
City	state	Zip Code		EEC	Idont	ification	Num	hor			
7 11.01.110	GA	30307			luciii	incation	Nulli	Dei	-		
Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	rd Purchase	e)									
Candidate Name		<u>, </u>	0-1		Transaction ID : SB21B.446 Amount of Each Disbursement tl						
			Category/ Type	Amo	ant or	Each	DISDUI	seme	nii inis P	eriou	
Office Sought: House Disbursem	ent For:			٦L.		4 5 I			7.40	0	
	Primary	General				,					
State: District:	Other (spec	city)		×	vlemo	Item					
Full Name (Last, First, Middle Initial)											
C. FP1 Strategies, LLC				Date	of D	isburser	ment				
				M	M /	D	D /	Υ	Y	Υ	
Mailing Address 3001 Washington Blvd				1)	01		_	2022		
7th Floor City S	state	Zip Code									
Arlington	VA	22201		FEC	Ident	ification	Num	ber			
Purpose of Disbursement National Director Pay											
Candidate Name						action					
Candidate Ivalie			Category/ Type	Amo	unt of	Each I	Disbur	seme	nt this P	eriod	
Office Sought: House Disbursem	nent For:		Type						13500.0	0	
	Primary	General						,	- 40		
	Other (specify) ▼				Memo Item						
State: District:											
SUPTOTAL of Dichuracomenta This Dage (anti-rally							-	-	13500.0	0	
SUBTOTAL of Disbursements This Page (optional)			······	- 1	=	7	+		133.0	#	
TOTAL This Period (last page this line number only).											

SCHEDULE B (FEC Form 3X)	llac	oroto osbadularia		LINE NUMBER: PAGE 71 OF 182								
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the	(check only		¬] oc						
		Summary Page	X 21b 28a	22 28b	23 28c	26 27 29 30b						
Any information conicd from such Departs and Ct	tomonto ma	not be sald as use										
Any information copied from such Reports and State or for commercial purposes, other than using the I												
NAME OF COMMITTEE (In Full)												
WOMEN SPEAK OUT PAC												
Full Name (Last, First, Middle Initial) A. FPF				Date of D	isbursemer							
Mailing Address 5959 Las Colinas Boulevard				10	12	2022						
City Irving	State TX	Zip Code 75039		FEC Ident	ification Nu	umber						
Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit	Card Purchas	e)		C	action ID :	: SB21B.44610						
Candidate Name			Category/ Type	Amount of	Each Dist	bursement this Period						
Senate	Primary	General		L		15.07						
State: District:	Other (spe	city) 🔻		★ Memo	Item							
Full Name (Last, First, Middle Initial)												
B. Freddy'S				Date of D	isbursemer	nt						
Mailing Address 60 N. Rock Rd., Suite 200				10 09 2022								
City Wichita	State KS	Zip Code 67206		FEC Ident	ification Nu	umber						
Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit				С								
Candidate Name			Category/ Type		SB21B.44612 bursement this Period							
	sement For:				55.51							
Senate President	Other (spe	General										
State: District:	Other (spe	city)		X Memo	Item							
Full Name (Last, First, Middle Initial) C. Freddy'S				Date of D	isbursemer	nt						
Mailing Address 60 N. Rock Rd., Suite 200				10	09	2022						
City Wichita	State KS	Zip Code 67206		FEC Ident	ification Nu	umber						
Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit	Card Purchase	e)		C	action ID	: SB21B.44613						
Candidate Name			Category/ Type			bursement this Period						
Office Sought: House Disbur Senate	sement For: Primary	General		L	7	3.00						
State: President District:	Other (spe	ecify) 🔻		X Memo	Item							
SUBTOTAL of Disbursements This Page (optional	l)		······ •			0.00						
TOTAL This Period (last page this line number or	nly)											

SCHEDULE B (FEC Form 3X)		INE NUMBER: PAGE 72 OF 182										
ITEMIZED DISBURSEMENTS		category of the	I `	only	′							
		Summary Page	x	21b 28a	22 28b	23 28c	26 29	27 30b				
Annintermenting against transports Demants and Chate												
Any information copied from such Reports and State or for commercial purposes, other than using the na												
NAME OF COMMITTEE (In Full)												
WOMEN SPEAK OUT PAC												
Full Name (Last, First, Middle Initial)					Date of Disbursement							
A. Freddy'S					Date of							
Mailing Address 60 N. Rock Rd., Suite 200					10	/ D	09	2022				
City	State	Zip Code			EEC Id	entificatio	n Numbe	r				
Wichita	KS	67206				ontinoatic	iii itailibe					
Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit C	ard Purchas	se)		71	C							
Candidate Name				_			_	1B.44614				
Canadato Hamo			Categor Type	y/	Amount	t of Each	Disburse	ment this Pe	əriod			
Office Sought: House Disburse	ment For:		1,700		Ι.			83.57	, "			
Senate	Primary	General				7	-	- 40				
President	Other (spe	ecify) 🔻			✗ Me	mo Item						
State: District:												
Full Name (Last, First, Middle Initial)					Doto of	Diahura	omont					
B. Hatfield, Karen, , ,					Date of	Disburs		Y				
Mailing Address 2800 Shirlington Road					10 13 2022							
City	State	Zip Code			EEC Id	entificatio	n Numbe	r				
Arlington	VA	22206				ontinoatie	T Tunibo	-				
Purpose of Disbursement Travel / Food / Beverage					Transaction ID : SB21B.44107 Amount of Each Disbursement this Pe							
Candidate Name			0-1									
			Categor Type	y/	Amoun	or Each	Disburse	ment this Po	erioa			
Office Sought: House Disburse	ment For:							203.21				
Senate	Primary	General										
President	Other (spe	ecify)			Me	mo Item						
State: District:												
Full Name (Last, First, Middle Initial) C. Hibachi & Bbq					Date of	Disburs	ement					
Mailing Address 12183 Katy Fwy					10	/ D	9	2022				
City	State	Zip Code										
Houston	TX	77077			FEC Id	entificatio	n Numbe	r				
Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit C	ard Purchas	se)		\neg	C	neaction	ND · SB2	1B 44616				
Candidate Name		y/	Transaction ID: SB21B.44616 Amount of Each Disbursement this Period									
Office Sought: House Disburse	ment For:	- 1.58										
Senate	Primary General					7						
President	Other (spe		X Me	mo Item								
State: District:												
SUBTOTAL of Disbursements This Page (optional).				•		-		203.2	1			
TOTAL This Period (last page this line number only	7)			_					\neg			

S П

SCHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 73 (73 OF	182			
ITEMIZED DISBURSEMENTS		category of the	I `	(check only one)					l 07			
		Summary Page		Ba 22 28b		23 28c	26		27 30b			
Any information copied from such Reports and State		not be sold or us										
or for commercial purposes, other than using the na												
NAME OF COMMITTEE (In Full)												
│												
Full Name (Last, First, Middle Initial)												
A. Hilton Garden Inn				Date	Date of Disbursement							
				M	M M / D D / Y Y Y Y							
Mailing Address 7930 Jones Branch Drive			10	10 14 2022								
City	State	Zip Code										
McLean	VA	22102		FEC I	FEC Identification Number							
Purpose of Disbursement	h\			C					.			
Travel (9/16/22 Usio Inc. Prepaid Debit Card Purc Candidate Name	mase)		T	ansac	tion I	D : SB	21B.4	4617				
Candidate Name			Category/ Type	Amou	nt of E	ach [Disburs	ement	this Pe	riod		
Office Sought: House Disburs	ement For:		1,400	- I - :					77.17			
Senate	Primary	General										
President	Other (spe	ecify) 🔻		X M	emo It	em						
State: District: Full Name (Last, First, Middle Initial)				+-				—				
B. Homes To Suites By Hilton				Date	of Disb	urser	nent					
				M = 1	И /	D	D /	Y Y	YYY	7		
Mailing Address 610 Newport Center Dr.				10	_	05	5	20	022			
City	State	Zip Code										
Newport Beach	CA	92660		FEC I	dentific	ation	Numbe	er				
Purpose of Disbursement	Card Durahaa	20)		С								
Food/Beverage (9/16/22 Usio Inc. Prepaid Debit (Candidate Name	Jard Purchas	se)		Ti	ansact	tion I	D : SB	21B.44	4619			
Candidate Name			Category/ Type	Amou	nt of E	ach [Disburs	ement	this Pe	riod		
Office Sought: House Disburs	ement For:		1,400						31.45			
Senate	Primary	General										
President State: District:	Other (spe	ecify)		X	emo Ito	em						
State: District: Full Name (Last, First, Middle Initial)				+-				—				
C. Homes To Suites By Hilton				Date	of Disb	urser	nent					
				M = 1	И /	D	D /	Y Y	YYY	7		
Mailing Address 610 Newport Center Dr.				10	_	06		20	022			
City	State	Zip Code		FE0.1								
Newport Beach	CA	92660		FECT	aentilic	ation	Numbe	ər	-			
Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit 0	Card Purchas	se)										
Candidate Name							D : SB			ام ماند		
			Category/ Type	Amou	nt of E	acn I	Jisburs	ement	t this Pe	riod		
	ement For:								30.82			
Senate	Primary	General										
State: District:	Other (spe	ecity) 🔻		X	emo Ito	em						
S.d.o. Biotiot.					-	_	_	_	-	_		
SUBTOTAL of Disbursements This Page (optional)									0.00)		
					,			_	-	一		
TOTAL This Period (last page this line number onl	y)											

SCHEDULE B (FEC Form 3X)			FOR I	OR LINE NUMBER: PAGE 74 OF					182					
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the	l `	(check only one) ★ 21b 22 23 26 27										
		Summary Page	X	21b 28a	22 28b	27 30b								
	<u> </u>					280								
Any information copied from such Reports and Stater or for commercial purposes, other than using the nar														
NAME OF COMMITTEE (In Full)														
WOMEN SPEAK OUT PAC														
Full Name (Last, First, Middle Initial)					Data of Dishamon i									
A. Homes To Suites By Hilton					Date of Disbursement 10 07 2022									
Mailing Address 610 Newport Center Dr.				10 07 2022										
· · · · · · · · · · · · · · · · · · ·	State CA	Zip Code			FEC Identification Number									
Newport Beach	92660			С			-							
Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase)													
Candidate Name	Candidate Name						Transaction ID : SB21B.44621 Category/ Amount of Each Disbursement this P							
Sandado Name			Amoun	t of Eaci	1 Disbui	rsemei	nt this Pe	riod						
Office Sought: House Disburser	ment For:	I	Туре						50.00					
Senate	Primary	General						,						
President	Other (spe	cify) 🔻			X Me	mo Item								
State: District:				-										
Full Name (Last, First, Middle Initial)					Date of	f Disburs	amant							
B. Homes To Suites By Hilton					Date of		D /	V	Y Y Y					
Mailing Address 610 Newport Center Dr.					10	/ D	07		2022					
City	State	Zip Code			FFC Id	entificati	on Num	her						
Newport Beach	CA	92660					711 110111							
Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	ard Purchase	e)			C									
Candidate Name		,	0-1			nsactio			-	ام ما اسم				
			Categor Type	y/	Amoun	t of Eaci	1 DISDUI	rsemei	nt this Pe	Priod				
Office Sought: House Disburser	ment For:								3.00	.				
Senate	Primary	General				-,-		,						
President	Other (spe	cify)			X Memo Item									
State: District:				-										
Full Name (Last, First, Middle Initial) C. Homes To Suites By Hilton					Date of	f Disburs			Y Y Y					
Mailing Address 610 Newport Center Dr.					10		09		2022					
City	State	Zip Code			FFC Id	entificati	on Num	her						
Newport Beach	CA	92660					711 110111		-					
Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	ard Purchase	e)			C	ansactio	n ID : S	B21B.	44623					
Candidate Name			Categor Type	y/	Amoun	t of Eacl	ı Disbur	rsemei	nt this Pe	riod				
Office Sought: House Disburser	ment For:		7,63	\dashv					121.32					
Senate	Primary	General				7		1						
President	Other (spe	cify) ▼												
State: District:														
SUBTOTAL of Disbursements This Page (optional)				•		-		7	0.00)				
TOTAL This Period (last page this line number only)	1			_				-						

S	CHEDULE B (FEC Form 3X)			FO)R L	R LINE NUMBER: PAGE 75 OF					F 182			
IT	EMIZED DISBURSEMENTS		category of the	(ch	check only one)									
			Summary Page		X	21b 28a	22 28b		23 28c		26 29	27 30b		
Γ.	ny information copied from such Reports and State													
	for commercial purposes, other than using the nar													
\setminus	NAME OF COMMITTEE (In Full)													
	WOMEN SPEAK OUT PAC													
_	Full Name (Last, First, Middle Initial)						Date of Dichurcoment							
Α.	Ihop						Date of Disbursement							
	Mailing Address 450 North Brand Blvd						10 11 2022							
	,	State	Zip Code				FEC Identification Number							
	Glendale	CA	91203			_	-		_		-			
	Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	ard Purchas	se)	_	7		C							
	Candidate Name		,	Cate	-							.44624		
				Amoun	it of	Eacn	DISDU	ırseme	ent this P	erioa				
	Office Sought: House Disburse	ment For:					Ι.		20. I		20 1	17.00)	
	Senate	Primary	General						,		,			
	State: District:	Other (spe	ecity) 🔻				X Me	emo	Item					
_	Full Name (Last, First, Middle Initial)													
В.	Ihop						Date o	of Di	sburse			Y	V	
	Mailing Address 450 North Brand Blvd					10 16 2022								
	,	State	Zip Code				FEC Id	denti	ification	ı Nur	nber			
	Glendale Purpose of Disbursement	CA	91203			_	С				-	-		
	Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Co	ard Purchas	se)	Ι.					action	ID . (SD24B	44625		
	Candidate Name			Cate		//						ent this P	eriod	
	Office Sought: House Disburse	ment For:		Ty	ре							67.37	7	
	Senate Sought.	Primary	General						7	_		07.01		
	President	Other (spe	ecify)				X Memo Item							
	State: District:						IVIE	51110	iteiii					
C	Full Name (Last, First, Middle Initial) Jimmy Johns						Date o	of Di	sburse	ment				
•	Jillilly Joillis						M M	_	D			Y	Υ	
	Mailing Address 2212 Fox Drive						10		16	3	L	2022		
	City	State	Zip Code				FEC Id	denti	fication	Nur	nber			
	Champaign Purpose of Disbursement	IL	61820									-		
	Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	ard Purchas	se)		Ţ		C	ans	action	ID :	SB21E	3.44627		
	Candidate Name			Cate	gory	//	Amoun	nt of	Each	Disbı	urseme	ent this P	eriod	
	Office Sought: House Disburse	ment For:		. y	100							76.65	5	
	Senate	Primary	General											
	President	other (specify) ▼ Memo Item												
_	State: District:													
5	SUBTOTAL of Disbursements This Page (optional)					•			T		-	0.0	0	
\vdash									-	_	-		-	
II	TOTAL This Period (last page this line number only	·)						_	_		_	_		

	CHEDULE B (FEC Form 3X) EMIZED DISBURSEMENTS		rate schedule(s)	FOR LINE I		PAGE 76 OF 182
	EMIZED DISBURSEMIEN 13		category of the Summary Page	21b 28a	22 2	23 26 27 28c 29 30b
	y information copied from such Reports and Statem for commercial purposes, other than using the nam					
<u> </u>	NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC		occ or any ponnou			<u> </u>
۹.	Full Name (Last, First, Middle Initial) Kroger				Date of Disbu	ursement
	Mailing Address 1014 Vine St				10	14 2022
	Cincinnati	State OH	Zip Code 45202		FEC Identifica	ation Number
	Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca Candidate Name	rd Purchase)	Category/		tion ID : SB21B.44628 ach Disbursement this Period
		nent For: Primary Other (spec	General	Type		30.00
	State: District:				★ Memo Ite	<u></u>
3.	Full Name (Last, First, Middle Initial) Kroger				Date of Disbu	ursement
	Mailing Address 1014 Vine St				10	15 2022
	,	State OH	Zip Code 45202		FEC Identifica	ation Number
	Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	ard Purchase			C	ion ID : SB21B.44629
	Candidate Name			Category/ Type		ach Disbursement this Period
		nent For: Primary Other (spec	General		V	16.96
	State: District:				Memo Ite	∍m
С.	Full Name (Last, First, Middle Initial) Kroger				Date of Disbu	
	Mailing Address 1014 Vine St				10	15 2022
	City Cincinnati Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	State OH ard Purchase	Zip Code 45202		FEC Identifica	ation Number
	Candidate Name		,	Category/ Type		tion ID: SB21B.4463(ach Disbursement this Period
		nent For: Primary Other (spec	General ify) ▼	71	X Memo Ite	1.70 em
s	UBTOTAL of Disbursements This Page (optional)			····· •		0.00
т	OTAL This Period (last page this line number only)					

SCHEDULE B (FEC Form 3X)			FOR LIN	R LINE NUMBER: PAGE 77 OF								
ITEMIZED DISBURSEMENTS		category of the	(check c									
		Summary Page	X 2 ⁻	3a 22 28b	23 28c	26 27 29 30b						
Any information copied from such Reports and State	ments may	not be sold or use										
or for commercial purposes, other than using the na												
NAME OF COMMITTEE (In Full)												
Full Name (Last, First, Middle Initial)												
A. Kruse, Donetta, , ,				Date o	Date of Disbursement							
Mailing Address 2000 Chidington Dd				10	/ D	3 2022						
Mailing Address 2800 Shirlington Rd Suite 1200				10		3 2022						
City	State	Zip Code 22206		FEC Identification Number								
Arlington	VA											
Purpose of Disbursement Travel / Food/Beverage / Gift Card Prizes / Printing	g		· · ·									
Candidate Name			Category/			ID: SB21B.44064 Disbursement this Period						
			Type	Amoun	it of Each	Disbursement this Feriod						
Office Sought: House Disburse	ement For:		7 L.		584.65							
Senate	Senate Primary General President Other (specify) ▼											
State: District:	Other (spe	ecity) \blacktriangledown		Me	emo Item							
Full Name (Last, First, Middle Initial)												
B. Staples				Date o	f Disburse	ement						
				M = M		D / Y Y Y Y Y						
Mailing Address 500 Staples Dr				10		3 2022						
City	State	Zip Code		FFC Io	lentification	n Number						
Framingham Purpose of Disbursement	MA	01702										
Printing				С								
Candidate Name			Category/	-		ID: SB21B.44064 Disbursement this Period						
			Type	71110011	t or Edon							
	ement For:					128.39						
Senate President	Primary Other (spe	General										
State: District:	Other (spe	ony)		X Memo Item								
Full Name (Last, First, Middle Initial)												
C. Staples				Date o	f Disburse	ement						
Mailing Address 500 Staples Dr				10	/ D 1	3 2022						
mailing / dai/000 300 Otapics Di					نا ا							
City	State	Zip Code		FEC Io	lentificatio	n Number						
Framingham Purpose of Disbursement	MA	01702										
Printing			Г	C	on opetion	ID : SB21B.44064						
Candidate Name			Category/			Disbursement this Period						
Office Cought:			Type	ne 19.25								
Office Sought: House Disburse Senate	ement For: Primary	General			-	13.23						
President	Other (spe											
State: District:				M	emo item							
						504.05						
SUBTOTAL of Disbursements This Page (optional).			·····•			584.65						
TOTAL This Period (last page this line number only	<i>γ</i>)											

SCHEDULE B (FEC Form 3X)			FOR LII	R LINE NUMBER: PAGE 78 OF							
ITEMIZED DISBURSEMENTS		parate schedule(s) h category of the	(0110011	(check only one)							
		d Summary Page		1b 22 8a 28b	23	26	27 30b				
Any information copied from such Reports and Sta	tomonto mo	, not be cold or us									
or for commercial purposes, other than using the								, 			
NAME OF COMMITTEE (In Full)											
WOMEN SPEAK OUT PAC											
Full Name (Last, First, Middle Initial)				Dete	of Diabour						
A. Kruse, Donetta, , ,				Date	Date of Disbursement						
Mailing Address 2800 Shirlington Rd Suite 1200				10	10 13 2022						
City	State	Zip Code		FEC	Identificati	on Numbe	r				
Arlington	VA	22206			-						
Purpose of Disbursement Travel / Mileage											
Candidate Name						n ID : SB2		1			
Canada Name			Category/ Type	Amou	nt of Eac	n Disburse	ement this Perio	oa			
Office Sought: House Disbut	sement For:		.,,,,,	- 1 .			100.10				
Senate	Primary	General				-	- 45				
President	Other (sp	ecify) 🔻		X N	lemo Item	l					
State: District:											
Full Name (Last, First, Middle Initial)				Doto	of Disburs	omont					
B. Kruse, Donetta, , ,				Date							
Mailing Address 2800 Shirlington Rd Suite 1200				10		13	2022				
City	State	Zip Code		FFC	Identificati	on Numbe	r				
Arlington Purpose of Disbursement	VA	22206									
Travel / Ponchos / Food/Beverage											
Candidate Name			0-1			n ID : SB2		اء ما			
			Category/ Type	Amou	ni oi Eac	Disburse	ement this Perio	Ju			
Office Sought: House Disbur	sement For:	I		T I .			116.92				
Senate	Primary	General		_							
President	Other (sp	ecify)		l N	lemo Item	1					
State: District:											
Full Name (Last, First, Middle Initial) C. Kruse, Donetta, , ,				Date	of Disburs						
Mailing Address 2800 Shirlington Rd Suite 1200				10		13	2022				
City	State	Zip Code			Latin agent of	NI - 1					
Arlington	VA	22206		FEC	identificati	on Numbe	r				
Purpose of Disbursement Travel / Mileage	-										
Candidate Name			Category/ Type			n ID : SB2 h Disburse	thement this Perio	bd			
Office Sought: House Disbut	sement For:		iype				53.20				
Senate	Primary	General			7	-	- 40				
President	Other (sp	ecify) 🔻	X Memo Item								
State: District:					.56 11.011	· 					
SUBTOTAL of Disbursements This Page (optional	ıl)				1.40		116.92				
				- 17							
TOTAL This Period (last page this line number o	nlv)			.		_					

ľ

	CHEDULE B (FEC Form 3X)	Use sepa	rate schedule(s)	FOR LINE (check only							
111	EMIZED DISBURSEMENTS	for each	category of the Summary Page	21b 28a	22 23 26 27 28b 28c 29 30b						
	y information copied from such Reports and Stater for commercial purposes, other than using the nan										
\rangle	NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC										
Α.	Full Name (Last, First, Middle Initial) Kruse, Donetta, , ,				Date of Disbursement						
	Mailing Address 2800 Shirlington Rd Suite 1200				10 13 2022						
	Arlington	State VA	Zip Code 22206		FEC Identification Number						
	Purpose of Disbursement Trave / Food/Beverage Candidate Name		[Transaction ID : SB21B.44080						
	Office Sought: House Disburser	ment For:		Category/ Type	Amount of Each Disbursement this Period 305.47						
	Senate President	Primary Other (spec	General sify) ▼		Memo Item						
	State: District:				<u> </u>						
В.	Full Name (Last, First, Middle Initial) Kruse, Donetta, , ,				Date of Disbursement						
	Mailing Address 2800 Shirlington Rd Suite 1200				10 13 2022						
	City Strington	State VA	Zip Code 22206		FEC Identification Number						
	Purpose of Disbursement Travel / Mileage				C Transaction ID : SB21B.44080						
	Candidate Name			Category/ Type	Amount of Each Disbursement this Period						
	Office Sought: House Senate President State: Disburser	nent For: Primary Other (spec	General		162.25 X Memo Item						
С.	Full Name (Last, First, Middle Initial) Longcore, Toby, , ,				Date of Disbursement						
	Mailing Address 2800 Shirlington Rd, Suite 1200				10 13 2022						
	Arlington	State VA	Zip Code 22206		FEC Identification Number						
	Purpose of Disbursement Printing / Food/Beverage Candidate Name		[Category/ Type	Transaction ID: SB21B.44159 Amount of Each Disbursement this Period						
	Office Sought: House Disburser Senate President	nent For: Primary Other (spec	General		277.84						
	State: District:	(opoc	,, ▼		Memo Item						

S П

SCHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 80 C								
ITEMIZED DISBURSEMENTS		parate schedule(s) category of the	(check on	·	□ 0C □ 07						
		Summary Page	X 21b		23 28c	26 27 29 30b					
Any information copied from such Reports and Stat	 amonte mav	not be sold or us									
or for commercial purposes, other than using the na											
NAME OF COMMITTEE (In Full)											
│											
Full Name (Last, First, Middle Initial)											
A. Staples				Date of	f Disburse	ement					
				M = M	/ D	D / Y Y Y Y Y					
Mailing Address 500 Staples Dr				10 13 2022							
City	State	Zip Code									
Framingham	MA	01702		FEC Identification Number							
Purpose of Disbursement				C							
Printing Candidate Name				Tra	nsaction	ID : SB21B.44159					
Candidate Name			Category/ Type	Amoun	t of Each	Disbursement this Period					
Office Sought: House Disburs	ement For:		Турс	1 .		224.25					
Senate	Primary	General				7					
President	Other (spe	ecify) 🔻		✗ Me	mo Item						
State: District:				_							
Full Name (Last, First, Middle Initial) B. Longhorn Steak				Date of	f Disburse	ement					
Longhom Steak				M = M		D / Y Y Y Y					
Mailing Address 1000 Darden Center Dr				10	1	9 2022					
City	Ctoto	Zin Codo									
City Orlando	State FL	Zip Code 32837		FEC Id	entificatio	n Number					
Purpose of Disbursement		,		С							
Food/Beverage (9/16/22 Usio Inc. Prepaid Debit (Jard Purchas	se)			nsaction	ID : SB21B.44632					
Candidate Name			Category/ Type	Amoun	t of Each	Disbursement this Period					
Office Sought: House Disburs	ement For:		туре	- I		30.00					
Senate	Primary	General			7	4- 4-					
President	Other (spe	ecify)		X Me	mo Item						
State: District:											
Full Name (Last, First, Middle Initial) C. Mann, Joanne, , ,				Date of	f Disburse	ement					
				M = M	/ D	D / Y Y Y Y Y					
Mailing Address 2800 Shirligton Road				10	1	3 2022					
Ste 1200 City	State	Zip Code									
Arlington	VA	22206		FEC Id	entificatio	n Number					
Purpose of Disbursement Travel / Office Supplies / Gift Card Prizes				C							
Candidate Name				1		ID : SB21B.44099					
Candidate Name			Category/ Type	Amoun	t of Each	Disbursement this Period					
Office Sought: House Disburs	ement For:		1,700			408.68					
Senate	Primary	General			7	7 1 4					
President	Other (spe	ecify) 🔻		Me	mo Item						
State: District:											
SUBTOTAL of Disbursements This Page (optional)						408.68					
CONTROL OF STREET OF THIS I ago (optional)				-		7 1 7					
TOTAL This Period (last page this line number only	y)										

SCHEDULE B (FEC Form 3X)	Ulas		FOR LINE	NUMBER:		PAGE 81 OF 182				
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the	(check on		¬ cc					
		Summary Page	X 21b 28a		23 28c	26 27 29 30b				
Any information copied from such Benevic and Otates	nonto mass	not be sold as								
Any information copied from such Reports and Stater or for commercial purposes, other than using the nam										
NAME OF COMMITTEE (In Full)										
WOMEN SPEAK OUT PAC										
Full Name (Last, First, Middle Initial)				D . (D: 1					
A. Mann, Joanne, , ,					Disburseme					
Mailing Address 2800 Shirligton Road				10 13 2022						
Ste 1200										
,	State	Zip Code		FEC Identification Number						
Arlington Purpose of Disbursement	VA	22206								
Travel / Mileage				C						
Candidate Name			Category/			: SB21B.44099 sbursement this Period				
			Type							
Office Sought: House Disburser					7	264.86				
Senate President	Primary Other (spec	General								
State: District:	Other (oper	Olly) Ψ		★ Mem	o Item					
Full Name (Last, First, Middle Initial)										
B. Marathon Food				Date of	Disburseme	ent				
				M = M	/ D D	/ Y = Y = Y = Y				
Mailing Address 228 Carroll Ave Unit A				10	14	2022				
City	State	Zip Code		FEC. Ide	ntification N	lumher				
Ronkonkoma	NY	11779			itilication iv					
Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	ard Purchase	e)		C						
Candidate Name		,	Catagony			: SB21B.44634				
			Category/ Type	Amount	JI EACII DIS	sbursement this Period				
Office Sought: House Disburser	ment For:			1 L	45	65.31				
Senate	Primary	General			,	,				
President State: District:	Other (spec	city)		X Mem	o Item					
Full Name (Last, First, Middle Initial)										
C. Marietta Diner				Date of	Disburseme	ent				
				M M	/ D D	/ Y Y Y Y				
Mailing Address 306 Cobb Pkwy				10	11	2022				
City	State	Zip Code		EEO Ida	atification N	lumbor				
Marietta	GA	30060		1	ntification N	iumber				
Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	ord Purchase	2)								
Candidate Name		-,	لبيا			: SB21B.4463€				
2 3			Category/ Type	Amount	DI Each Dis	sbursement this Period				
Office Sought: House Disburser	ment For:		VF -	1 []	40.	5.13				
Senate	Primary	General								
President District:	Other (spec	cify) ▼		X Mem	o Item					
State: District:										
SUBTOTAL of Disbursements This Page (optional)						0.00				
22272 S.				-	7	7 7				
TOTAL This Period (last page this line number only)										

S	CHEDULE B (FEC Form 3X)			FC	DR I	R LINE NUMBER: PAGE 82 OF					F 182		
IT	EMIZED DISBURSEMENTS		arate schedule(s) category of the	(ch	(check only one)								
			Summary Page		×	21b 28a	22 28b		23 28c		26 29	27 30b	
Γ.													
	ny information copied from such Reports and Stater for commercial purposes, other than using the nar												
	NAME OF COMMITTEE (In Full)												
	WOMEN SPEAK OUT PAC												
^	Full Name (Last, First, Middle Initial)				Date of Disbursement								
Α.	Marietta Diner						Date	וט וו				V V	V
	Mailing Address 306 Cobb Pkwy						10 18 2022						
	City	State	Zip Code				FEC Identification Number						
	Marietta	GA	30060				_					-	
	Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	ard Purchas	se)	Г.	7		C						
	Candidate Name			<u> </u>	_							.44637	
	Caracato Hamo	Category Type								Disbi	ırseme	ent this P	eriod
	Office Sought: House Disburse	ment For:		.,								76.86	3
	Senate	Primary	General						,	_		- 4	
	President	Other (spe	ecify) ▼				X Me	emo	Item				
_	State: District:												
В.	Full Name (Last, First, Middle Initial) McDonald's						Date o	ıf Di	shurse	ment			
٥.	MCDonaids						M M	,, ,,	D			Y	V
	Mailing Address 110 N. Carpenter St						10		1	- 1	L	2022	
		State	Zip Code				FEC Io	denti	fication	n Nur	nber		
	Chicago Purpose of Disbursement	IL	60607					-	-	_		-	
	Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	ard Purchas	se)	г.			C						
	Candidate Name			Cate	agor	\/\						.44638 ent this P	eriod
					/pe	y'	, tilloui	. 0.	Luon	Diobi	21001110	211C CI 110 T	onod
	Office Sought: House Disbursel	ment For:							-		7-1	19.67	7
	Senate	Primary	General										
	President State: District:	Other (spe	ecity)				X Me	emo	Item				
_	Full Name (Last, First, Middle Initial)												
C.	McDonald's						Date o	_	sburse			YIYI	v .
	Mailing Address 110 N. Carpenter St						10	_	15		L	2022	
	City	State	Zip Code				FEC Id	denti	fication	Nur	nber		
	Chicago Purpose of Disbursement	IL	60607									-	
	Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	ard Purchas	e)		Ι		C	ans	action	ID : 1	SB21E	3.44639	
	Candidate Name			Cate	egor /pe	y/	Amoun	nt of	Each	Disbu	ırseme	ent this P	eriod
	Office Sought: House Disburser	ment For:		1 9	γÞΕ							109.02	2
	Senate	Primary	General							_	7	1 40	
	President	Other (spe	ecify) 🔻				X Me	emo	Item				
	State: District:							0					
	SUBTOTAL of Disbursements This Page (optional)					-					7	0.0	0
L						_			-	_			一
1 1	FOTAL This Period (last page this line number only)	1						_	_	_	_		

S П

SCHEDULE B (FEC Form 3X)	11-		FOR L	INE N	IUMBER:				PAGE	83 C)F 182		
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the	(check	٠.	′		20 I		ne	07			
		Summary Page		21b 28a	22 28b		23 28c	Ш	26 29	27 30b			
Any information copied from such Reports and State	ements may	not be sold or us									ions		
or for commercial purposes, other than using the na													
NAME OF COMMITTEE (In Full)													
Full Name (Last, First, Middle Initial)													
A. McDonald's					Date of Disbursement								
				M M / D D / Y Y Y Y									
Mailing Address 110 N. Carpenter St				10 15 2022									
City	State	Zip Code		FEC Identification Number									
Chicago	IL	60607				STUIL	auon	ivui	IIDEI				
Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit (Card Purchase	e)		7	С								
Candidate Name			Category							.44640 ent this F	Period		
			Type	"	AIIIUUII	OIE	aon L	וטטוכ	11361116				
	ement For: Primary								7	94.0	0		
Senate President	☐ General cify) ▼												
State: District:	_ Ctrici (ope	Olly) 🔻			✗ Me	mo It	em						
Full Name (Last, First, Middle Initial)													
B. McDonald's					Date of	f Disb	urser	ment					
Mailing Address 110 N. Carpenter St					м = м 10	/	18		Y	2022	Y		
Maining Addition 110 N. Carpenter St					10	- 1	IC			2022			
City	State	Zip Code			FEC Id	entific	ation	Nun	nber				
Chicago Purpose of Disbursement	IL	60607					-	-	-	-			
Food/Beverage (9/16/22 Usio Inc. Prepaid Debit 0	Card Purchase	e)		C Transaction ID : SB21B.44641									
Candidate Name			Category	//		. 44641 ent this F	Period						
Office Cought			Type				_	_	-	16.0	0		
Office Sought: House Disburse Senate	ement For: Primary	General						-	7	10.0	U .		
President	Other (spe				Y M-	me li	om						
State: District:	_				Memo Item								
Full Name (Last, First, Middle Initial)					D-4	· D: ·							
C. N.C. VALUES COALITION					Date of	i DISD				V	V		
Mailing Address 9650 STICKLAND RD					10	′	01			2022	T		
STE 103-226	lo												
City RALEIGH	State NC	Zip Code 27615			FEC Id	entific	cation	Nun	nber				
Purpose of Disbursement	1	21010		7	С	C900	1455	6					
State Director Pay	·							-	SB21B	.44169			
Candidate Name			Category	//	Amoun	t of E	ach [Disbu	ırseme	ent this F	Period		
Office Sought: House Disburse	ement For:		Туре	-	5000.00								
Senate	Primary	General			_			_	7	1 46			
President	Other (spe	cify) ▼			Me	mo It	em						
State: District:													
SUBTOTAL of Disbursements This Page (optional)										5000.0	00		
OSSISTAL OF DISSURSCINENTS THIS Fage (Optional)				_	-	-7	-	÷	7				
TOTAL This Period (last page this line number onl	y)			•					, .				

SCHEDULE B (FEC Form 3X)	llee		FOR LINE NUMBER: PAGE 84									
ITEMIZED DISBURSEMENTS		rate schedule(s) category of the	(check onl	· — · –	¬ oo							
		Summary Page	X 21b 28a	22 28b	23 28c	26 27 29 30b						
Any information copied from such Departs and Chateren	onte mau =	not he cold or										
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam												
NAME OF COMMITTEE (In Full)												
WOMEN SPEAK OUT PAC												
Full Name (Last, First, Middle Initial)				Data of [Date of Disbursement							
A. Nai Thai Cuisine				M M / D D / Y Y Y								
Mailing Address 5486 Chamblee Dunwoody Rd				10 10 2022 FEC Identification Number								
City	State	Zip Code										
Dunwoody Dishuraneset	GA	30338										
Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	rd Purchase	e)	· · ·	C								
Candidate Name		,	Oata nam /			: SB21B.44643 sbursement this Period						
			Category/ Type	Amount	n Each Dis	spursement this renou						
Office Sought: House Disbursen	nent For:			11	20. I I	11.23						
	Primary	General			,	,						
	Other (spec	cify) 🔻		✗ Mem	o Item							
State: District:												
Full Name (Last, First, Middle Initial) B. Office Max				Date of [Disburseme	ent						
- Office Iviax				M M	/ D D	/						
Mailing Address 263 Shuman Blvd				10	19	2022						
,	State	Zip Code		FEC Ider	tification N	lumber						
Naperville Purpose of Disbursement	IL	60563										
Printing (9/16/22 Usio Inc. Prepaid Debit Card Purcl	nase)		· · ·	C								
Candidate Name			Category/			: SB21B.44644 sbursement this Period						
Office Sought: House Disbursen	nent For:		Type	1		27.01						
	Primary	General			7	4-						
President	Other (spec	cify)		X Mem	o Item							
State: District:				Welli	o item							
Full Name (Last, First, Middle Initial)												
C. Panda Express				Date of L	Disburseme							
Mailing Address 1717 Walnut Grove Ave #100				10	14	2022						
maining real eds 1717 Walliat Glove Ave #100												
City	State	Zip Code		FEC Ider	tification N	lumber						
Rosemead Purpose of Disbursement	CA	91770										
Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	rd Purchase	e)		C								
Candidate Name			Catagony			: SB21B.44645 sbursement this Period						
			Category/ Type	Amount	I Lacii Di	soursement this I chou						
Office Sought: House Disbursen				1	7	14.27						
	Primary	General										
State: District:	Other (spec	city) 🔻		✗ Mem	o Item							
State. District.												
SUBTOTAL of Disbursements This Page (optional)						0.00						
						4						
TOTAL This Period (last page this line number only).				1								

SCHEDULE B (FEC Form 3X)			FOR	LINE	NUMBER:	:	\Box	PAGE	85 OF	182
ITEMIZED DISBURSEMENTS		parate schedule(s) n category of the	(checl	•						
		Summary Page	×		22	23		26	27	
Г				28a	28b	280		29	30b	
Any information copied from such Reports and Stat or for commercial purposes, other than using the na										
NAME OF COMMITTEE (In Full)										
WOMEN SPEAK OUT PAC										
Full Name (Last, First, Middle Initial)					Data	f Dialarum				
A. Panda Express					Date o	f Disburs	sement	Y	Y Y Y Y	7
Mailing Address 1717 Walnut Grove Ave #100					10		17	L.	2022	_
City	State	Zip Code			FEC Id	entificati	on Num	nber		
Rosemead	CA	91770							-	
Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit (Card Purcha	se)		71	C					
Candidate Name			<u> </u>			ansactio				
Canada Name			Categor Type	y/	Amoun	t of Eacl	1 Disbu	rseme	nt this Pe	riod
Office Sought: House Disburs	ement For:				Ι.			.	32.66	
Senate	Primary	General				,		,		
State: President State:	Other (sp	ecify) \blacktriangledown			X Me	emo Item	I			
Full Name (Last, First, Middle Initial)										
B. Panera Bread					Date o	f Disburs	ement			
Mailing Address 3630 S. Geyer Rd Suite 100					10	/ D	12		2022	
City	State	Zip Code								
St Louis	MO	80922			FEC Id	entificati	on Num	ıber		
Purpose of Disbursement	Card Duraha	20)		\neg	С				.	
Food/Beverage (9/16/22 Usio Inc. Prepaid Debit (Candidate Name		se)			Tra	nsactio	n ID : S	B21B.	44647	
Candidate Name			Categor	y/	Amoun	t of Eacl	า Disbu	rseme	nt this Pe	riod
Office Sought: House Disburs	ement For:		Туре						10.00	П.
Senate	Primary	General				7		7	1 45	
President	Other (sp	ecify)			X Me	emo Item				
State: District:					ш.					
Full Name (Last, First, Middle Initial) C. Panera Bread					Date o	f Disburs	sement			
Mailing Address 3630 S. Geyer Rd Suite 100					10		12		2022]
City	State	Zip Code								
St Louis	MO	80922			FEC Id	entificati	on Num	ıber		
Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit (Card Purcha	se)		\neg	С					
Candidate Name			Categor	y/		ansaction t of Eacl			. 4464 8 Int this Pe	riod
Office Sought: House Disburs	ement For:		Туре						14.94	
Senate	Primary	General				7		7	1 40	
President	Other (sp	ecify) 🔻			X Me	emo Item				
State: District:					IVIE	ino itell				
SUBTOTAL of Disbursements This Page (optional)					Τ.				0.00)
222 2 2 2 2 2 1110 1 ago (optional)					-	1	\Rightarrow			#
TOTAL This Period (last page this line number on	lv)									

Use separate schedule(s) for code cologony (check only one)	SC	HEDULE B (FEC Form 3X)	Har	water against the C.	FOR LINI	E NUMBER:		PAGE 86 OF 18
Detailed Summary Page 28a 28b 28 30b 30b Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) WOMEN SPEAK OUT PAC Full Name (Last, First, Middle Initial) A. Panera Bread Mailing Address 3630 S. Geyer Rd Suite 100 City State: District. Middle Initial) B. Panera Bread Mailing Address 3630 S. Geyer Rd Suite 100 City State: District. Primary General Primary General District. Primary General Primary General District. Primary General Primary General District. Primary General Date of Disbursement For: 45,00 X Memo Item FEC Identification Number C. Transaction ID: S8218.4469 Amount of Each Disbursement For: 45,00 X Memo Item Fell Name (Last, First, Middle Initial) B. Panera Bread Mailing Address 3630 S. Geyer Rd Suite 100 City State Zip Code 89922 FEC Identification Number C. States Disbursement For: 10 14 2022 FEC Identification Number C. States Disbursement For: 10 14 2022 FEC Identification Number C. States Disbursement For: 10 14 2022 FEC Identification Number C. States Disbursement For: 10 15 2022 FEC Identification Number C. States Disbursement 10 15 2022 FEC Identification Number C. States Disbursement 10 15 2022 FEC Identification Number C. Category/ 10 15 2022 FEC Identification Number C. Transaction ID: S8218.44651 Amount of Each Disbursement 10 10 15 2022 FEC Identification Number C. Transaction ID: S8218.44651 Amount of Each Disbursement 10 10 10 10 10 10 10 1	ITE	MIZED DISBURSEMENTS			I '			
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) WOMEN SPEAK OUT PAC Full Name (Last, First, Middle Initial) A Panera Bread Mailing Address 3630 S. Geyer Rd Suite 100 City St.Louis Purpose of Disbursement FoodBaverage (8/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Category/ Type State: District Full Name (Last, First, Middle Initial) B Panera Bread Mailing Address 3630 S. Geyer Rd Suite 100 City St.Louis Prepaid and the service of Disbursement For: Senate Primary General Primary General Primary General FoodBaverage (8/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Category/ Type Category/ Type Category/ Type Category/ Type FoodBaverage (8/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Category/ Type FoodBaverage (8/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Category/ Type FoodBaverage (8/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Category/ Type FoodBaverage (8/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type FoodBaverage (8/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type FoodBaverage (8/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type FoodBaverage (8/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type FoodBaverage (8/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type FoodBaverage (8/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type FoodBaverage (8/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type FoodBaverage (8/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type FoodBaverage (8/16/22 Usio Inc. Prepaid Debit Card Purchase) FoodBaverage (8/16/22 Usio Inc. Prepaid Debit Card Purchase) FoodBaverage (8/16/22 Usio Inc. Prepaid Debit Card Purchase) FoodBaverage (8/16/								
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) WOMEN SPEAK OUT PAC Full Name (Last, First, Middle Initial) A Panera Bread Mailing Address 3630 S. Geyer Rd Suite 100 City Statis Furpose of Disbursement FroodSeverage (8/16/22 Uslo Inc. Prepaid Debit Card Purchase) FroodSeverage (8/16/22 Uslo Inc. Prepaid Debit Card Purchase) Full Name (Last, First, Middle Initial) B Panera Bread Mailing Address 3630 S. Geyer Rd Suite 100 City Statis Full Name (Last, First, Middle Initial) B Panera Bread Mailing Address 3630 S. Geyer Rd Suite 100 City Statis FundSeverage (8/16/22 Uslo Inc. Prepaid Debit Card Purchase) Category/ Type FEC Identification Number Fundseverage (8/16/22 Uslo Inc. Prepaid Debit Card Purchase) Fundseverage (8/16/22 Uslo Inc. Prepaid Debit Card Purchase) Fundseverage (8/16/22 Uslo Inc. Prepaid Debit Card Purchase) Findseverage (8/16/22 Uslo Inc. Prepaid Debit Card Purchase) Fundseverage (8	Δηι	information copied from such Departs and Chater	nonte mai :	not he cold or				
Full Name (Last, First, Middle Initial) A. Panera Bread Mailing Address 3630 S. Geyer Rd Suite 100 City St Louis No 80922 Purpose of Disbursement No 80922 Feed Identification Number Category' 19pe Candidate Name Category' 19pe Office Sought: House President Other (specify) Vige St Louis Disbursement For: General Other (specify) Vige Candidate Name Category' 19pe Af 5.00 City St Louis Disbursement For: General Other (specify) Vige Category' 19pe Af 5.00 City St Louis Disbursement For: General Other (specify) Vige Category' 19pe Categ								
Full Name (Last, First, Middle initial)	\ \ \	IAME OF COMMITTEE (In Full)						
A. Panera Bread Mailing Address 3630 S. Geyer Rd Suite 100 City St Louis President State: District: Full Name (Last, First, Middle Initial) C. Panera Bread Mailing Address 3630 S. Geyer Rd Suite 100 City State: District: Full Name (Last, First, Middle Initial) C. Panera Bread Mailing Address 3630 S. Geyer Rd Suite 100 City St Louis Full Name (Last, First, Middle Initial) C. Panera Bread Mailing Address 3630 S. Geyer Rd Suite 100 City St Louis Full Name (Last, First, Middle Initial) C. Panera Bread Mailing Address 3630 S. Geyer Rd Suite 100 City St Louis Full Name (Last, First, Middle Initial) C. Panera Bread Mailing Address 3630 S. Geyer Rd Suite 100 City St Louis Full Name (Last, First, Middle Initial) C. Panera Bread Mailing Address 3630 S. Geyer Rd Suite 100 City St Louis Full Name (Last, First, Middle Initial) C. Panera Bread Mailing Address 3630 S. Geyer Rd Suite 100 City St Louis Full Name (Last, First, Middle Initial) C. Panera Bread Mailing Address 3630 S. Geyer Rd Suite 100 City St Louis Full Name (Last, First, Middle Initial) C. Panera Bread Mailing Address 3630 S. Geyer Rd Suite 100 City St Louis Full Name (Last, First, Middle Initial) Date of Disbursement Category Type Code St Louis Mo Disbursement For: Serial Read Date of Disbursement Category Type Code Transaction ID: SB21B.44651 Amount of Each Disbursement Port Memo Item Subtotal Category Type Code Transaction ID: SB21B.44651 Amount of Each Disbursement Port Memo Item Subtotal Category Types Code Transaction ID:	\ \ '	WOMEN SPEAK OUT PAC						
Mailing Address 3630 S. Geyer Rd Suite 100 City St Louis Senate President Other (specify) ▼ Category Type Category Type Clip St Louis District: Full Name (Last, First, Middle Initial) Senate President Disbursement For: Senate President State: District: Full Name (Last, First, Middle Initial) Cher (specify) State: District: Full Name (Last, First, Middle Initial) Cher (specify) State: District: Full Name (Last, First, Middle Initial) Cher (specify) State: District: Full Name (Last, First, Middle Initial) Cher (specify) State: District: Full Name (Last, First, Middle Initial) Cher (specify) State: District: Full Name (Last, First, Middle Initial) Cher (specify) State: District: Full Name (Last, First, Middle Initial) Cher (specify) State: District: Full Name (Last, First, Middle Initial) Cher (specify) State: District: Full Name (Last, First, Middle Initial) Cher (specify) State: District: Full Name (Last, First, Middle Initial) Cher (specify) State: District: Full Name (Last, First, Middle Initial) Cher (specify) State: District: Full Name (Last, First, Middle Initial) Cher (specify) State: District: Full Name (Last, First, Middle Initial) Cher (specify) State: District: Full Name (Last, First, Middle Initial) Cher (specify) State: District: Full Name (Last, First, Middle Initial) Cher (specify) State: District: Full Name (Last, First, Middle Initial) Cher (specify) State: District: Full Name (Last, First, Middle Initial) Cher (specify) State: District: Full Name (Last, First, Middle Initial) Cher (specify) State: District: Full Name (Last, First, Middle Initial) Cher (specify) State: District: Full Name (Last, First, Middle Initial) Cher (specify) State: District: Full Name (Last, First, Middle Initial) Cher (specify) State: District: Full Name (Last, First, Middle Initial) Cher (specify) State: District: Full Name (Last, First, Middle Initial) Cher (specify) State:						Doto of	Dioburoomo	ant.
Mailing Address 3630 S. Geyer Rd Suite 100 City St Louis Purpose of Disbursement Food*Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Disbursement For: Senate President State: District: Full Name (Last, First, Middle Initial) By Panera Bread Mailing Address 3630 S. Geyer Rd Suite 100 City St Louis Full Name (Last, First, Middle Initial) Candidate Name Disbursement For: Senate President Primary General W Memo Item State Stat	Α.	Panera Bread				Date of		
StLouis MO 80922 Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Office Sought: House President Other (specify) Memo Item Date of Disbursement Tor: State: Disbursement Tor: State: Disbursement Tor: Senate President Other (specify) Memo Item Date of Disbursement FEC Identification Number Category/ Type Transaction ID : \$8218.44649 Amount of Each Disbursement this Period Transaction ID : \$8218.44649 Amount of Each Disbursement this Period Date of Disbursement FEC Identification Number FEC Identification Number Category/ Type FEC Identification Number Category/ Type FEC Identification Number Category/ Type FEC Identification Number Fec Identification Number Category/ Type FEC Identification Number Fell Name (Last, First, Middle Initial) Cher (specify) Memo Item Date of Disbursement this Period Date of Disbursement Full Name (Last, First, Middle Initial) Chapter Senate President District: Full Name (Last, First, Middle Initial) Chapter Senate President District: Full Name (Last, First, Middle Initial) Chapter Senate President District: Fill Name (Last, First, Middle Initial) Category/ Type FEC Identification Number Transaction ID : \$8218.44650 Transaction ID : \$8218.44651 Transaction ID : \$8218.44651	N	Mailing Address 3630 S. Geyer Rd Suite 100				10		
St Louis	C	City		Zip Code		FFC Ide	entification N	Jumber
Food/Beverage (8/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Office Sought: House Primary General Primary General Procession of Disbursement For: Senate President Other (specify) ▼ State: Disbursement For: Senate Primary General Primary General Procession of Disbursement For: Senate President Mo 89922 Purpose of Disbursement For: Senate Primary General Primary General Primary General Primary General Primary General Procession of Disbursement this Period Mo 89922 FEC Identification Number Category/ Type In a senate President Other (specify) ▼ Memo Item Transaction ID : S8218.44650 Amount of Each Disbursement FEC Identification Number Category/ Type In a senate President Disbursement In this Period Disbursement Disbu			МО	80922			Thin oation 1	
Candidate Name Office Sought: House Senate Primary General State: District: Senate Primary General State: District: General General Primary G			rd Purchase	2)	· · ·	C		
Office Sought: House Primary General President Primary General Pr	7	Candidate Name		,	Oata nam /			
Senate President Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) B. Panera Bread Mailing Address 3630 S. Geyer Rd Suite 100 City St Louis MO 80922 Purpose of Disbursement Pood/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Category/ Type Office Sought: House President Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Panera Bread Mailing Address 3630 S. Geyer Rd Suite 100 City St Louis Senate Primary General Other (specify) Full Name (Last, First, Middle Initial) C. Panera Bread Mailing Address 3630 S. Geyer Rd Suite 100 City St Louis MO 80922 FEC Identification Number Category/ Type 197.89 X Memo Item Fec Identification Number Category/ Type Transaction ID : SB218.4650 Amount of Each Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) City St Louis MO 80922 FEC Identification Number Full Name (Last, First, Middle Initial) Category/ Type Office Sought: House Disbursement For: Category/ Type Office Sought: House Disbursement For: Senate Primary General Primary General President State: District: Amount of Each Disbursement this Period State: District: Memo Item Substortal of Disbursements This Page (optional)						Amount	OI Each Dis	soursement this renou
State: District: Other (specify) ▼ State: District: Strict Color	C	Office Sought: House Disbursen	ment For:			11.,		45.00
State: District: Full Name (Last, First, Middle Initial) B. Panera Bread Mailing Address 3630 S. Geyer Rd Suite 100 City St Louis Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Panera Bread Mailing Address 3630 S. Geyer Rd Suite 100 City St Louis Primary General Primary General Primary General Purpose of Disbursement For: Senate Primary General Primary General Purpose of Disbursement For: State: District: Full Name (Last, First, Middle Initial) C. Panera Bread Mailing Address 3630 S. Geyer Rd Suite 100 City St Louis Purpose of Disbursement For: State Now Primary General Primary Gene			•				,	,
Full Name (Last, First, Middle Initial) B. Panera Bread Mailing Address 3630 S. Geyer Rd Suite 100 City St Louis Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Disbursement For: Senate President State: District: City State Zip Code MO 80922 FEC Identification Number Category/ Type FEC Identification ID: SB21B.44650 Amount of Each Disbursement this Period Fill Name (Last, First, Middle Initial) Date of Disbursement FEC Identification ID: SB21B.44650 Amount of Each Disbursement this Period Fill Name (Last, First, Middle Initial) Date of Disbursement FEC Identification Number Category/ Type FEC Identification ID: SB21B.44650 Amount of Each Disbursement this Period Full Name (Last, First, Middle Initial) Date of Disbursement FEC Identification Number FEC Identification Number Category/ Type FEC Identification Number FEC Identification Number Category/ Type FEC Identification Number Category/ Type FEC Identification Number Category/ Type FEC Identification Number FEC Identification Number Category/ Type FEC Identification Number Comparison of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) FEC Identification Number Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) FEC Identification Number Fec Identification Number Comparison of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) FEC Identification Number Fec Identification Number Comparison of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) FEC Identification Number Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Fec Identification Number Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Fec Identification Number Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Fec Identification Number Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Fec Identification Number Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase			Other (spec	cify) 🔻		✗ Mei	mo Item	
Mailing Address 3630 S. Geyer Rd Suite 100 City St Louis Mo 80922 Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Office Sought: House President President District: Full Name (Last, First, Middle Initial) C. Panera Bread Mailing Address 3630 S. Geyer Rd Suite 100 City St Louis Mo 80922 Full Name (Last, First, Middle Initial) C. Panera Bread Mailing Address 3630 S. Geyer Rd Suite 100 City St Louis Mo 80922 Category/ Type Date of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Transaction ID: SB21B.44650 Amount of Each Disbursement This Period FEC Identification Number Category/ Type Transaction ID: SB21B.44650 Amount of Each Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Transaction ID: SB21B.44651 Amount of Each Disbursement this Period Transaction ID: SB21B.44651 Amount of Each Disbursement this Period Transaction ID: SB21B.44651 Amount of Each Disbursement this Period Transaction ID: SB21B.44651 Amount of Each Disbursement this Period Transaction ID: SB21B.44651 Amount of Each Disbursement this Period Transaction ID: SB21B.44651 Amount of Each Disbursement this Period Transaction ID: SB21B.44651 Amount of Each Disbursement this Period Transaction ID: SB21B.44651 Amount of Each Disbursement this Period Transaction ID: SB21B.44651 Amount of Each Disbursement this Period	_					+		
Mailing Address 3630 S. Geyer Rd Suite 100 City St Louis Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Disbursement For: Senate President State: District: Full Name (Last, First, Middle Initial) Cardidate Name City St Louis Purpose of Disbursement For: Senate President Mo 80922 FEC Identification Number Category/ Type Date of Disbursement FEC Identification Number FEC Identification Number Category/ Type Date of Disbursement FEC Identification Number Category/ Type Office Sought: House Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Office Sought: House President Disbursement For: Senate President Office Sought: House President Disbursement For: Senate President Office Sought: House President Disbursement For: Senate President Disbursement For: Senate Primary General Office Sought: House Senate President Disbursement For: Senate Primary General Office Sought: House Senate President Disbursement For: Senate Primary General Office Sought: House Senate President Disbursement For: Senate Primary General Office Sought: House Senate Primary General Office Sought: House Senate President Disbursement For: Senate Primary General Office Sought: House Senate President Disbursement Senate Disbursement Disbursem	_	•				Date of	Disburseme	ent
City St Louis Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Office Sought: President State: District: Full Name (Last, First, Middle Initial) C. Panera Bread Mailing Address 3630 S. Geyer Rd Suite 100 City St Louis Mo State Mo State Senate Primary General Other (specify) State State State City St Louis Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) City St Louis Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Transaction ID: SB21B.44650 Amount of Each Disbursement FEC Identification Number Date of Disbursement FEC Identification Number Category/ Type FEC Identification Number Category/ Transaction ID: SB21B.44651 Amount of Each Disbursement this Period Transaction ID: SB21B.44651 Amount of Each Disbursement this Period State: District: State: District: State: District: Substortal of Disbursements This Page (optional)	,	Fallela Dieau						
St Louis Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Category/ Type Office Sought: House Disbursement For: State: District: Full Name (Last, First, Middle Initial) Cher (specify) State Zip Code MO 80922 FEC Identification Number Category/ Type Transaction ID: SB218.44650 Amount of Each Disbursement this Period Full Name (Last, First, Middle Initial) Cher (specify) State Zip Code MO 80922 FEC Identification Number Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type FEC Identification ID: SB218.44650 Amount of Each Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼ State: District: SubstortAL of Disbursements This Page (optional)	N	Mailing Address 3630 S. Geyer Rd Suite 100						
Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Office Sought: House Senate Primary General President State: District: Full Name (Last, First, Middle Initial) City State S				1 '		FEC Ide	entification N	Jumber
Transaction ID : SB21B.44650 Amount of Each Disbursement this Period Office Sought:		7. 200.0	МО	80922				
Category/ Type Office Sought: House Senate Primary General President State: District: Full Name (Last, First, Middle Initial) C: Panera Bread Mailing Address 3630 S. Geyer Rd Suite 100 City St Louis MO 80922 Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Office Sought: House Disbursement For: Senate Primary General Other (specify) Office Sought: House Disbursement For: Senate Primary General Other (specify) State: District: Substored Primary General Other (specify) Memo Item Amount of Each Disbursement this Period FEC Identification Number Category/ Type Transaction ID: SB21B.44651 Amount of Each Disbursement this Period Memo Item Substored Primary General Other (specify) Memo Item Ondo			ard Purchase	e)	L			
Office Sought:	7	Candidate Name				1		
State: District: Full Name (Last, First, Middle Initial) C. Panera Bread Mailing Address 3630 S. Geyer Rd Suite 100 City St Louis Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼ State: District: Memo Item PEC Identification Number Category/ Type Transaction ID: SB21B.44651 Amount of Each Disbursement this Period X Memo Item Memo Item Memo Item Memo Item Output Supplies Su	C	Office Sought: House Disbursen	nent For:		71:	1		197.89
State: District: Full Name (Last, First, Middle Initial) C. Panera Bread Mailing Address 3630 S. Geyer Rd Suite 100 City St Louis Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Office Sought: House Disbursement For: Senate President Other (specify) State: District: Date of Disbursement FEC Identification Number Category/ Type Category/ Type Other (specify) Memo Item Date of Disbursement FEC Identification Number Category/ Transaction ID: SB21B.44651 Amount of Each Disbursement this Period Memo Item Date of Disbursement FEC Identification Number Category/ Type Other (specify) Memo Item			Primary	General				7 1 4
Full Name (Last, First, Middle Initial) Panera Bread Mailing Address 3630 S. Geyer Rd Suite 100 City St Louis Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Category/ Type Office Sought: House President State: District: Disbursement For: Senate Primary General Other (specify) State: Disbursement For: Senate Primary General Other (specify) Mm / P P P / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	_		Other (spec	cify)			no Item	
Mailing Address 3630 S. Geyer Rd Suite 100 City St Louis Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Office Sought: House President State: District: Date of Disbursement FEC Identification Number Category/ Type Transaction ID: SB21B.44651 Amount of Each Disbursement this Period X Memo Item Subtrotal of Disbursements This Page (optional)								
Mailing Address 3630 S. Geyer Rd Suite 100 City St Louis Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Category/ Type Office Sought: House President President State: District: Substrate Disbursement For: Senate Primary General Other (specify) ▼ Mailing Address 3630 S. Geyer Rd Suite 100 FEC Identification Number Category/ Transaction ID: SB21B.44651 Amount of Each Disbursement this Period Mailing Address 3630 S. Geyer Rd Suite 100 Table 10	_	•				Data of	Diebureomo	ont
Mailing Address 3630 S. Geyer Rd Suite 100 City St Louis Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Category/ Type Office Sought: House Primary General President State: District: Substortal of Disbursements This Page (optional)	C.	Panera Bread						_
St Louis Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Office Sought: House Senate Primary General Primary General Other (specify) ▼ State: District: Substruct: Number Category/ Type Category/ Type Category/ Type W Memo Item	N	Mailing Address 3630 S. Geyer Rd Suite 100						
St Louis Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) State: District: Substruct: Mo 80922 Category/ Type Transaction ID : SB21B.44651 Amount of Each Disbursement this Period Mo 80922 Category/ Type Transaction ID : SB21B.44651 Amount of Each Disbursement this Period Mo 1000	C	City		Zip Code		FEC Ide	entification N	Jumber
Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Category/ Type Office Sought: House Senate Primary General President Other (specify) State: District: Substrict: Memo Item Output Disbursement For: Senate Primary General Other (specify) Other (specify) Other (specify) Output Disbursements This Page (optional)	_		МО	80922				
Candidate Name Category/ Type Office Sought: House Senate Primary General President Other (specify) ▼ State: District: Transaction ID: SB21B.44651 Amount of Each Disbursement this Period Memo Item One of the specify Type Memo Item One of the specify Type Memo Item		The second secon	rd Purchase	e)	· · · ·			
Office Sought: House Disbursement For: Senate Primary General President Other (specify) ▼ Subtrotal of Disbursements This Page (optional)	Ō	Candidate Name						
State: District: Other (specify) ▼	Ō	Office Sought: House Disbursen	nent For:		-71	11 []		84.97
State: District: Memo Item SUBTOTAL of Disbursements This Page (optional)		Senate	Primary	General			7.	7
State: District: SUBTOTAL of Disbursements This Page (optional)			Other (spec	cify) 🔻		X Mei	mo Item	
SOBTOTAL OF DISDUISEMENTS THIS Fage (optional)		State: District:						
TOTAL This Period (last page this line number only)	su	BTOTAL of Disbursements This Page (optional)			·····			0.00
	то	TAI This Period (last nage this line number only)						

SCHEDULE B (FEC Form 3X)	lles	make ask - style ()	FOR LIN	E NUMBER	:	PAGE 87 OF	182
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the	(check o				
		Summary Page	X 21		23 28c	26 27 29 30b	
Any information conied from such Deposits and Otation	nonto mai:	not be seld or					
Any information copied from such Reports and Stater or for commercial purposes, other than using the nam							
NAME OF COMMITTEE (In Full)							
WOMEN SPEAK OUT PAC							
Full Name (Last, First, Middle Initial)				Doto	f Disburse	mont	
A. Panera Bread				Date	/ DISDUISE		-
Mailing Address 3630 S. Geyer Rd Suite 100				10	1:		
,	State	Zip Code		FFC Id	dentification	n Number	
St Louis	МО	80922					
Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	rd Purchase	e)					
Candidate Name			Catamanul			ID: SB21B.44652 Disbursement this Per	riod
			Category/ Type	Amour	it of Each	Disbursement this Fer	lou
Office Sought: House Disburser	ment For:			∃ Ⅰ	1 20 1	115.24	.
Senate	Primary	General			, , , , , ,	,	
State: District:	Other (spec	cify) 🔻		✗ M∈	emo Item		
Full Name (Last, First, Middle Initial) B. Panera Bread				Date o	f Disburse	ment	
- Fallela Dieau				M M	_	D / Y Y Y Y	-
Mailing Address 3630 S. Geyer Rd Suite 100				10		5 2022	
	State	Zip Code		FEC Id	dentification	n Number	
St Louis Purpose of Disbursement	МО	80922					
Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	ard Purchase	e)	L	C			
Candidate Name			Category/ Type			ID: SB21B.44653 Disbursement this Per	riod
Office Sought: House Disburser	nent For:			- [10.55	
Senate	Primary	General			7		_
	Other (spec	cify)		X Me	emo Item		
State: District:							
Full Name (Last, First, Middle Initial) C. Party City					f Disburse		
Mailing Address 477 Route 10 East				10	/ D 1		
,	State	Zip Code		FEC Id	dentification	n Number	
Randolph Purpose of Disbursement	NJ	07869					
Event Supplies (9/16/22 Usio Inc. Prepaid Debit Ca	rd Purchase	e)					
Candidate Name			Category/ Type			ID: SB21B.44655 Disbursement this Per	riod
Office Sought: House Disburser	nent For:		71: -	$\exists \mid \Box$		12.45	
Senate	Primary	General			7		
President	Other (spec	cify) 🔻		X Me	emo Item		
State: District:							
SUBTOTAL of Disbursements This Page (optional)			······································			0.00	
TOTAL This Period (last page this line number only)							П

SCHEDULE B (FEC Form 3X)			FOR LI	NE NUMBER	:	PAG	E 88 OF 182			
ITEMIZED DISBURSEMENTS		parate schedule(s) n category of the	I `	only one)						
		Summary Page		1b 22 8a 28b	23 28c	26	27 30b			
Any information conind from such Departs and S	tatamanta may	, not be cold or use								
Any information copied from such Reports and S or for commercial purposes, other than using the										
NAME OF COMMITTEE (In Full)										
WOMEN SPEAK OUT PAC										
Full Name (Last, First, Middle Initial)				Dete	f Dialassa					
A. Party City				Date o	of Disburse		YYY			
Mailing Address 477 Route 10 East				10	/ D	5	2022			
City	State	Zip Code		FEC Id	dentification	n Number				
Randolph	NJ	07869					-			
Purpose of Disbursement Event Supplies (9/16/22 Usio Inc. Prepaid Deb	it Card Purchas	se)	· · ·							
Candidate Name		,				ID : SB21E				
			Category/ Type	Amour	it of Each	Dispurseme	ent this Period			
Office Sought: House Disb	ursement For:			TI.		1 20 1	5.01			
Senate	Primary	General			,	,				
State: District:	Other (sp	ecify) \blacktriangledown		X Me	emo Item					
Full Name (Last, First, Middle Initial)										
B. Party City				Date o	of Disburse	ement				
					/ D	D / Y	YYYY			
Mailing Address 477 Route 10 East				10	1	5	2022			
City	State NJ	Zip Code		FEC Id	dentification	n Number				
Randolph Purpose of Disbursement	INJ	07869		C			-			
Event Supplies (9/16/22 Usio Inc. Prepaid Deb	oit Card Purchas	se)			onoostion	ID : SB21B	44657			
Candidate Name			Category/				ent this Period			
			Type				0.07			
Office Sought: House Disb	ursement For: Primary	General			1 7	1-45-1	8.67			
President	Other (sp			V						
State: District:		,		↑ Me	Memo Item					
Full Name (Last, First, Middle Initial)										
C. Phillips, Kyle, , ,				Date o	of Disburse					
Mailing Address 2800 Shirlington Road				10		3 / Y	2022			
Suite 1200										
City	State	Zip Code		FEC Id	dentification	n Number				
Arlington Purpose of Disbursement	VA	22206					-			
Travel/ Food/Beverage / Gift Card Prizes (Part	ial Below Thres	shold)				ID : SB21E	12001			
Candidate Name			Category/				ent this Period			
Office Country	 		Type				242.62			
Office Sought: House Disb	ursement For:	General					243.62			
President	Other (sp									
State: District:	C.i.ioi (op			Me	emo Item					
SUBTOTAL of Disbursements This Page (option	nal)			. L.			243.62			
TOTAL This Deviced floor many 11										
I TOTAL This Period (last page this line number	oniv)									

SCHEDULE B (FEC Form 3X)			FOR L	INE NU	JMBER:		Р	AGE 89	OF 182
ITEMIZED DISBURSEMENTS		parate schedule(s) category of the	l `	only or	— ′				,
		Summary Page		21b 28a	22 28b	23 28c	26 29	30	
Any information copied from such Reports and State	ments may	not be sold or use							
or for commercial purposes, other than using the na									
NAME OF COMMITTEE (In Full)									
WOMEN SPEAK OUT PAC									
Full Name (Last, First, Middle Initial)					Doto of	Dishura	amant		
A. Phillips, Kyle, , ,					Date of	Disburs		Y Y Y	() () () () () () () () () ()
Mailing Address 2800 Shirlington Road					10	/ D	3	2022	
Suite 1200		T							
City Arlington	State VA	Zip Code 22206			FEC Ide	entificatio	n Numb	er	
Purpose of Disbursement	***	22200		_	С				7
Mileage						neoctic:	ID : CD	24D 4200	
Candidate Name			Category	//			_	21B.4380 ement this	_
			Type						
	ment For:	Consessi						4	5.50
Senate President	Primary Other (spe	General							
State: District:	Carlot (Spe				X Mei	mo Item			
Full Name (Last, First, Middle Initial)									
B. Phillips, Kyle, , ,						Disburs		V	
Mailing Address 2800 Shirlington Road Suite 1200					10		13	2022	
City	State VA	Zip Code			FEC Ide	entificatio	n Numb	er	
Arlington Purpose of Disbursement	٧٨	22206		_	С				1
Travel / Food/Beverage / Office Supplies						neootie:	ID · SE	21B.4411	1
Candidate Name			Category	//			_	ement this	
Office Coughts House			Type	_				44	1.56
Office Sought: House Disburse Senate	ment For: Primary	General				_		444	4.56
President	Other (spe				П.,				
State: District:	1 (Spe	,,			Mei	mo Item			
Full Name (Last, First, Middle Initial)									
C. Phillips, Kyle, , ,					Date of	Disburs	ement		
Mailing Address 2800 Shirlington Road				-	M M M	/ D	D /	2022	
Suite 1200					10			2022	
	State	Zip Code			FEC Ide	entificatio	n Numb	er	
Arlington Purpose of Disbursement	VA	22206							7
Travel / Mileage			· · ·	$\exists \mid \mid$	C	nonctic	ID : CD	21B.4411	إ
Candidate Name			Category	//				ement this	
Office Sought: House Disburse	ment For:		Туре					259	9.00
Senate	Primary	General				-7-			46
President	Other (spe				X Mei	mo Item			
State: District:	·				iviel	ino item			
						-		44	14.56
SUBTOTAL of Disbursements This Page (optional).				<u> </u>		-		44	14.56
TOTAL This Period (last page this line number only	·)								

	CHEDULE B (FEC Form 3X) EMIZED DISBURSEMENTS		rate schedule(s)	FOR LINE (check only		PAGE 90 OF 182
•	EMIZED DIODORGEMENTO		category of the Summary Page	X 21b 28a		23 26 27 28c 29 30b
	ly information copied from such Reports and Statem for commercial purposes, other than using the name					
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC					
۹.	Full Name (Last, First, Middle Initial) Publix				Date of Disb	oursement
	Mailing Address 3300 Publix Corporate Pkwy				10	07 2022
	Lakeland	State FL	Zip Code 33811			cation Number
	Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca Candidate Name	rd Purchase)	Category/		ction ID : SB21B.44658 Each Disbursement this Period
	President	nent For: Primary Other (spec	General ify) ▼	Type	X Memo It	30.00
	State: District: Full Name (Last, First, Middle Initial)					
3.	QT				Date of Disb	pursement
	Mailing Address 952 Old Peachtree Road Northwes	st			10	08 2022
	,	State GA	Zip Code 30043		FEC Identific	cation Number
	Purpose of Disbursement Travel (9/16/22 Usio Inc. Prepaid Debit Card Purcha	ase)			C	tion ID : SB21B.44660
	Candidate Name			Category/ Type		Each Disbursement this Period
	Office Sought: House Disbursem	nent For: Primary	General			50.47
	President State: District:	Other (spec	ify)		X Memo It	em
Э.	Full Name (Last, First, Middle Initial) QT				Date of Disb	
	Mailing Address 952 Old Peachtree Road Northwes	t			10	08 2022
	Lawrenceville Purpose of Disbursement	State GA	Zip Code 30043		FEC Identified	cation Number
	Travel (9/16/22 Usio Inc. Prepaid Debit Card Purcha Candidate Name	ase) 		Category/ Type	Transac	ction ID: SB21B.44661 Each Disbursement this Period
		nent For: Primary Other (spec	General ify) ▼		X Memo It	53.82 tem
s	SUBTOTAL of Disbursements This Page (optional)			······		0.00
Т	OTAL This Period (last page this line number only)					

SCHEDULE B (FEC Form 3X) TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	FOR LINE (check only	I VOIVIDEI I.	PAGE 91 OF 182
	Detailed Summary Page	X 21b 28a		26 27 29 30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam				
NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
Full Name (Last, First, Middle Initial) A. QT			Date of Disbursement	Y Y Y Y
Mailing Address 952 Old Peachtree Road Northwest	ıt .		10 09	2022
Lawrenceville	State Zip Code 30043		FEC Identification Num	ber
Purpose of Disbursement Travel (9/16/22 Usio Inc. Prepaid Debit Card Purcha Candidate Name	ase)	Category/	Transaction ID : S Amount of Each Disbur	
President	ment For: Primary General Other (specify) ▼	Type	★ Memo Item	60.11
State: District:			<u> </u>	
Full Name (Last, First, Middle Initial) 3. QT			Date of Disbursement	Y . Y . Y . Y
Mailing Address 952 Old Peachtree Road Northwes	st		10 16	2022
,	State Zip Code 30043		FEC Identification Num	ber
Purpose of Disbursement Travel (9/16/22 Usio Inc. Prepaid Debit Card Purcha	ase)		C Transaction ID : S	P21P 44662
Candidate Name		Category/ Type	Amount of Each Disbu	
Office Sought: House Disbursem	nent For: Primary General		4	9.16
State: President O	Other (specify)		X Memo Item	
Full Name (Last, First, Middle Initial) C. QT			Date of Disbursement	
Mailing Address 952 Old Peachtree Road Northwest	st		10 / 16	2022
Lawrenceville Purpose of Disbursement	State Zip Code GA 30043		FEC Identification Num	ber
Travel (9/16/22 Usio Inc. Prepaid Debit Card Purcha Candidate Name	ase)	Category/ Type	Transaction ID : S Amount of Each Disbur	
	nent For: Primary General Other (specify) ▼	71	X Memo Item	97.79
SUBTOTAL of Disbursements This Page (optional)		·············	7	0.00
TOTAL This Period (last page this line number only).				

	CHEDULE B (FEC Form 3X) EMIZED DISBURSEMENTS		rate schedule(s)	FOR LINE (check only		PAGE 92 OF 182
•	EMILED DIODORGEMENTO		category of the Summary Page	X 21b 28a	22 2 28b 2	23 26 27 28c 29 30b
	ly information copied from such Reports and Statem for commercial purposes, other than using the nam					
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC		, , , , , , , , , , , , , , , , , , , ,			
۹.	Full Name (Last, First, Middle Initial) QT				Date of Disbu	ursement
	Mailing Address 952 Old Peachtree Road Northwest	t			10	17 2022
	Lawrenceville	State GA	Zip Code 30043			ation Number
	Purpose of Disbursement Travel (9/16/22 Usio Inc. Prepaid Debit Card Purcha Candidate Name	ase)		Category/		tion ID : SB21B.44665 ach Disbursement this Period
	President	nent For: Primary Other (spec	General ify) ▼	Type	Memo Ite	17.94
	State: District: Full Name (Last, First, Middle Initial)					
3.	QT				Date of Disbu	ursement
	Mailing Address 952 Old Peachtree Road Northwes	st			10	19 2022
	,	State GA	Zip Code 30043		FEC Identifica	ation Number
	Purpose of Disbursement Travel (9/16/22 Usio Inc. Prepaid Debit Card Purcha	ase)			С	ion ID - SPO4D 44666
	Candidate Name			Category/ Type		ion ID : SB21B.44666 ach Disbursement this Period
		nent For: Primary Other (spec	General			25.00
	State: District:	Otrici (Spec	'' <i>y)</i>		X Memo Ite	em
С.	Full Name (Last, First, Middle Initial) RaceTrac				Date of Disbu	
	Mailing Address 200 Galleria Pkwy S				10	07 2022
	City Atlanta Purpose of Disbursement Travel (9/16/22 Usio Inc. Prepaid Debit Card Purcha	State GA	Zip Code 30339		FEC Identifica	ation Number
	Candidate Name			Category/ Type		tion ID: SB21B.44667 ach Disbursement this Period
		nent For: Primary Other (spec	General ify) ▼	1,1,00	X Memo Ite	3.00 em
s	SUBTOTAL of Disbursements This Page (optional)			·····	1 7	0.00
Т	OTAL This Period (last page this line number only).					

	CHEDULE B (FEC Form 3X) EMIZED DISBURSEMENTS		arate schedule(s)			LINE I	NUMBER one)	:			PAGE	93 O	F 182
•	LIMIZED DIODONOLIMENTO		category of the Summary Page		×	21b 28a	22 28b		23 28c		26 29	27 30b	
	ny information copied from such Reports and State	ments may r	not be sold or use	d by	anv			nur					one
	for commercial purposes, other than using the nar												
\rangle	NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC												
۹.	Full Name (Last, First, Middle Initial) RaceTrac						Date o	f Dis	sburse		Y	YIY	Y
	Mailing Address 200 Galleria Pkwy S						10	_	08	3	L	2022	
	Atlanta	State GA	Zip Code 30339				FEC Io	lenti	fication	Num	ıber		
	Purpose of Disbursement Travel (9/16/22 Usio Inc. Prepaid Debit Card Purch Candidate Name	ase)		Coto	-					_		3.44668 ent this P	oriod
	Office Sought: House Disburse	ment For:		Cate Ty	gor /pe	y/	Amoun	-	Eacii	DISDU	ISeme	15.61	
	Senate President	Primary Other (spec	General cify) ▼				X Me	emo	Item		,	- 4	
	State: District:												
3.	Full Name (Last, First, Middle Initial) RaceTrac						Date o	f Dis	sburse		Υ	YIY	Υ
	Mailing Address 200 Galleria Pkwy S						10	_	0	8	L	2022	
	City Atlanta Purpose of Disbursement	State GA	Zip Code 30339				FEC Id	lenti	fication	Num	ıber	-	
	Travel (9/16/22 Usio Inc. Prepaid Debit Card Purch Candidate Name	nase)		Cate	egor /pe	y/						.44669 ent this P	eriod
	Office Sought: House Disburser Senate President	ment For: Primary Other (spec	General Cify)								,	12.08	3
	State: District:						X Me	emo	Item				
С.	Full Name (Last, First, Middle Initial) RaceTrac						Date o	f Dis		_	V	YIY	V
	Mailing Address 200 Galleria Pkwy S						10		15		L	2022	Ť
	,	State GA	Zip Code				FEC Io	lenti	fication	n Num	nber		
	Atlanta Purpose of Disbursement		30339	-	-	_	С						
	Travel (9/16/22 Usio Inc. Prepaid Debit Card Purch Candidate Name	ase)		Cate		ry/	Tr					3.4467(ent this P	eriod
	Office Sought: House Senate President State: Disburse	ment For: Primary Other (spec	General Gify) ▼	Ту	/pe		X Me	emo	Item		,	38.8	5
_	SUBTOTAL of Disbursements This Page (optional)						Γ.	-	-	-	-	0.0	0
	OTAL This Period (last page this line number only					_	Ħ	÷		÷		1 7	Ħ

SCHEDULE B (FEC Form 3X)	Hon sim	roto och salvila (r.)		NUMBER:		PAGE 94 OF	182
ITEMIZED DISBURSEMENTS		rate schedule(s) category of the	(check onl	· — · —	7.00 <u> </u>		
		Summary Page	X 21b 28a	22 28b	23 28c	26 27 29 30b	
Any information copied from such Departs and Statement	onte mai:	ot he cold or ve					
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam							
NAME OF COMMITTEE (In Full)							
WOMEN SPEAK OUT PAC							
Full Name (Last, First, Middle Initial)				Doto of D	iahuraamar	o+	
A. Reimer, Diana, , ,				Date of D	isbursemer		_
Mailing Address 2800 Shirlington Rd, Suite 1200				10	13	2022	
,	state	Zip Code		FFC Ident	ification Nu	ımber	
7 timigton	VA	22206					
Purpose of Disbursement Travel / Food/Beverage (All Below Threshold)			· · ·	C			
Candidate Name			Cotogony			SB21B.43992 bursement this Pe	oriod
			Category/ Type	Amount of	Each Disi	Jursement this re	illou
Office Sought: House Disbursem	nent For:			11	æ	338.05	
	Primary	General			,	,	
State: District:	Other (spec	ify) ▼		Memo	Item		
Full Name (Last, First, Middle Initial)							
B. Residence Inn				Date of D	isbursemer	nt	
Residence IIII				M M	D D	/ Y Y Y Y Y	-
Mailing Address 10400 Fernwood Road				10	06	2022	
,	tate	Zip Code		FEC Ident	ification Nu	umber	
Bethesda Purpose of Disbursement	MD	20817					
Travel (9/16/22 Usio Inc. Prepaid Debit Card Purcha	ase)			C			
Candidate Name			Category/ Type			SB21B.44671 bursement this Pe	riod
Office Sought: House Disbursem	ent For:			11	7	23.06	
	Primary	General			,	,	
President State: District:	Other (spec	ify)		X Memo	Item		
Full Name (Last, First, Middle Initial)							
C. Sam'S Club				Date of D	isbursemer	nt	
Mailing Address 608 SW 8th Street				10	08	2022	_
	state	Zip Code		FEC Ident	ification Nu	umber	
Bentonville Purpose of Disbursement	AR	72712					
Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Car	rd Purchase)		C	antinu ID	CD04D 44071	
Candidate Name			Category/ Type			: SB21B.44673 bursement this Pe	riod
Office Sought: House Disbursem	nent For:			1 L	- ·	30.00	_ [
	Primary	General			,	,	
	Other (spec	ify) ▼		X Memo	Item		
State: District:							
SUBTOTAL of Disbursements This Page (optional)			······•			338.05	,
TOTAL This Period (last page this line number only).							

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS		rate schedule(s)	FOR LINE I	
	Detailed S	category of the Summary Page	X 21b 28a	22 23 26 27 28b 28c 29 30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC	. www.	y ponut		The same continuous
Full Name (Last, First, Middle Initial) A. Sam'S Club				Date of Disbursement
Mailing Address 608 SW 8th Street				10 08 2022
Bentonville	State AR	Zip Code 72712		FEC Identification Number
Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Car Candidate Name	rd Purchase)	Cata	Transaction ID : SB21B.44674 Amount of Each Disbursement this Period
Office Sought: House Disbursem	ent For:		Category/ Type	Amount of Each Disbursement this Period 91.72
Senate President	Primary Other (spec	General ify) ▼		✗ Memo Item
State: District:				_
Full Name (Last, First, Middle Initial) B. Sam'S Club				Date of Disbursement
Mailing Address 608 SW 8th Street				10 19 2022
,	State AR	Zip Code 72712		FEC Identification Number
Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Car				C Transaction ID - SPOAD 44675
Candidate Name			Category/ Type	Transaction ID : SB21B.44675 Amount of Each Disbursement this Period
	Primary	General		9.72
State: President Office Control of Control o	Other (spec	y)		✗ Memo Item
Full Name (Last, First, Middle Initial) C. Sam'S Club				Date of Disbursement
Mailing Address 608 SW 8th Street				10 19 2022
Bentonville	State AR	Zip Code 72712		FEC Identification Number
Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Car Candidate Name	rd Purchase)	Cotagna	Transaction ID : SB21B.44676 Amount of Each Disbursement this Period
			Category/ Type	
President	nent For: Primary Other (spec	General General ▼		304.06 X Memo Item
State: District:				
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only).				0.00

S П

SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER:		PAGE 96 OF 182
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the	(check onl	' — '		
		Summary Page	X 21b 28a	22 28b	23 28c	26 27 29 30b
Any information copied from such Reports and State	mente may	not be sold or us				
or for commercial purposes, other than using the na						
NAME OF COMMITTEE (In Full)						
\mid $ angle$ WOMEN SPEAK OUT PAC						
Full Name (Last, First, Middle Initial)				Ī		
A. Shell				Date of	Disburse	ment
				M = M	/ D	D / Y Y Y Y Y
Mailing Address PO Box 2463				10	07	2022
City	State	Zip Code		FF0.11		
Houston	TX	77252		FEC Idei	ntification	Number
Purpose of Disbursement Travel (9/16/22 Usio Inc. Prepaid Debit Card Purc	hase)					
Candidate Name						ID : SB21B.44678
			Category/ Type	Amount	of Each	Disbursement this Period
Office Sought: House Disburse	ement For:	L		11	40. 1	34.90
Senate	Primary	General			,	,
State: District:	Other (spe	city) 🔻		★ Mem	o Item	
Full Name (Last, First, Middle Initial)						
B. Shell				Date of	Disburse	ment
				M - M	/ D	
Mailing Address PO Box 2463				10	09	9 2022
City	State	Zip Code		FFC Idea	atification	Number
Houston	TX	77252			illication	Number
Purpose of Disbursement Travel (9/16/22 Usio Inc. Prepaid Debit Card Purc	hase)			C		
Candidate Name			Cotogony			ID: SB21B.44679 Disbursement this Period
			Category/ Type	Amount	JI Lacii i	Disbursement this Fellou
	ement For:			l L	7	100.69
Senate President	Primary Other (spe	General				
State: District:	Other (spe	city)		X Mem	o Item	
Full Name (Last, First, Middle Initial)						
C. Shell				Date of	Disburse	ment
Mailing Address PO Box 2463				10	/ 11	
Mailing Address FO Box 2405				10		2022
City	State	Zip Code		FEC Ide	ntification	Number
Houston Purpose of Disbursement	TX	77252				
Travel (9/16/22 Usio Inc. Prepaid Debit Card Purc	hase)			C	anation.	ID : SB21B.44680
Candidate Name			Category/			Disbursement this Period
Office Sought: House	mant F		Type			21.87
Office Sought: House Disburse Senate	ement For: Primary	General			7	21.01
President	Other (spe			X Mem	o Item	
State: District:				ivierr	io itelli	
						0.00
SUBTOTAL of Disbursements This Page (optional).			·····•			0.00
TOTAL This Period (last page this line number only	/)					

SCHEDULE B (FEC Form 3X)			FOR L	INE N	IUMBER:	FOR LINE NUMBER: PAGE 97 OF 1								
ITEMIZED DISBURSEMENTS		parate schedule(s) a category of the	(criccit oriny oric)											
		Summary Page		21b 28a	22 28b	23 28c		26 29	27 30b					
Any information copied from such Reports and State	mente may	not be sold or use												
or for commercial purposes, other than using the na														
NAME OF COMMITTEE (In Full)														
Full Name (Last, First, Middle Initial)														
A. Shell					Date of	Disburs	ement							
M. W. A. I.I. BO B. 2400					M = M		D /		Y Y Y					
Mailing Address PO Box 2463					10		15		2022	_				
City	State	Zip Code			FFC Id	entification	on Num	nber						
Houston	TX	77252			_				-					
Purpose of Disbursement Travel (9/16/22 Usio Inc. Prepaid Debit Card Purch	nase)			7	С									
Candidate Name			Cotonon	./		nsactio	_			oriod				
			Category Type	"	Amount of Each Disbursement this Period									
Office Sought: House Disburse	ment For:				L.		4	-	89.04					
Senate	Primary	General				,								
State: District:	Other (sp	есіту) 🔻			X Me	mo Item								
Full Name (Last, First, Middle Initial)														
B. Shell					Date of	Disburs	ement							
					M = M		D /		YIYIY					
Mailing Address PO Box 2463					10	_	15	-	2022	_				
City	State	Zip Code		FFC Id	entification	on Num	nher							
Houston Purpose of Disbursement	TX	77252			_		Jii i taii		-					
Travel (9/16/22 Usio Inc. Prepaid Debit Card Purch	hase)				С									
Candidate Name			Category	//		nsaction	_		. 44682 ent this Pe	eriod				
			Type	"	7 tillouin	. Or Edoi	Пооб	1001110	THE THIS I C	71100				
	ment For:					-		,	35.63					
Senate President	Primary Other (spe	General												
State: District:	Other (op	oony)			X Me	mo Item								
Full Name (Last, First, Middle Initial)														
C. Shell Food Mart					Date of	Disburs	ement							
Mailing Address PO Box 2463					M M M		15		2022	7				
Mailing Address 1 C Box 2403					10	-	.0		LULL	_				
	State	Zip Code		FEC Id	entification	on Num	nber							
Houston Purpose of Disbursement	TX	77252							-					
Food/Beverage (9/16/22 Usio Inc. Prepaid Debit C	ard Purchas	se)		C	nsactio	n ID · S	D21D	1169/						
Candidate Name			Category	//			_		nt this Pe	eriod				
Office Sought: House Disburse							-	20.00	П					
Office Sought: House Disburse Senate	ment For: Primary	General				7		7	20.00					
President	Other (sp				X Me	mo Item								
State: District:					ivie	mo item								
									0.00	$\overline{}$				
SUBTOTAL of Disbursements This Page (optional).				<u> </u>				7	0.00	,				
TOTAL This Period (last page this line number only	v)													

Use separate schedule(s) (chock only one)	SC	HEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 98 OF 1						F 182		
Detailed Summary Page 288 280 280 29 300 3	ITE	EMIZED DISBURSEMENTS			_ I ` _	·	.0	_	20 F				
Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) WOMEN SPEAK OUT PAC Full Name (Last, First, Middle Initial) A Short, Catherine, , ,										Ш	L		
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Pull) WOMEN SPEAK OUT PAC Full Name (Last, First, Middle Initial) A. Short, Catherine, , , Mailing Address 2800 Shrington Road Ste 1200 City Arington Fuppose of Disbursement Frowl FoodBeverage Candidate Name Candidate Name Citics Sought: Benate Fresident Other (specify) ▼ Mailing Address 2800 Shrington Road State: District Full Name (Last, First, Middle Initial) B. Short, Catherine, , , Mailing Address 2800 Shrington Road State: District Full Name (Last, First, Middle Initial) B. Short, Catherine, , , Mailing Address 2800 Shrington Road State: District Full Name (Last, First, Middle Initial) City Cardidate Name Cardidate Name Cardidate Name Cardidate Name Cardidate Name Cardidate Name Category/ Type Disbursement Full Name (Last, First, Middle Initial) Cardidate Name Category/ Type Category/ Type Transaction ID: S8218.43771 Amount of Each Disbursement this Peniod Category/ Type Transaction ID: S8218.43771 Amount of Each Disbursement Travel Food Disbursement Travel Category/ Type Transaction ID: S8218.43771 Amount of Each Disbursement Travel Transaction ID: S8218.43771 Amount of Each Disbursement Transaction ID: S8	Δ	information assist from such Departs and Chate											
Full Name (Last, First, Middle Initial) A. Short, Catherine, , Malling Address 2800 Shirlington Road Site 1200 City Office Sought: House President Travel Fosught: House Office Sought: House Office													
Full Name (Last, First, Middle Initial) A. Short, Catherine, , ,	\setminus	NAME OF COMMITTEE (In Full)											
A Short, Catherine, , , Mailing Address 2800 Shirlington Road Ste 1200 City	\setminus	WOMEN SPEAK OUT PAC											
Mailing Address 2800 Shirlington Road Sie 1200							D-t-	(D:-I-					
Site 1200 City Artington Purpose of Disbursement Travel Candidate Name Disbursement For: Short, Catherine, , Mailing Address 2800 Shirlington Road Ste 1200 City Artington Office Sought: House Senate Purpose of Disbursement Travel Candidate Name Disbursement For: Senate Purpose of Disbursement Travel Candidate Name Disbursement Disbursement Travel Category' Nype Disbursement Disbursement Travel Transaction ID : \$8218.43771 Amount of Each Disbursement fine Period Transaction ID : \$8218.43771 Amount of Each Disbursement Travel Travel Category' Transaction ID : \$8218.43771 Amount of Each Disbursement Travel Category' Transaction ID : \$8218.43771 Amount of Each Disbursement Travel Category' Transaction ID : \$8218.43771 Amount of Each Disbursement Travel Candidate Name Date of Disbursement Travel Category' Transaction ID : \$8218.43771 Amount of Each Disbursement Candidate Name Disbursement Travel Category' Transaction Number Category' Transaction ID : \$8218.43771 Amount of Each Disbursement this Period Transaction ID : \$8218.43771 Amount of Each Disbursement Candidate Name Disbursement Travel Category' Transaction ID : \$8218.43771 Amount of Each Disbursement this Period Transaction ID : \$8218.43771 Amount of Each Disbursement this Period Transaction ID : \$8218.43771 Amount of Each Disbursement Candidate Name Disbursement Travel Candidate Name Disbursement For: Category' Transaction ID : \$8218.43771 Amount of Each Disbursement Candidate Name Disbursement Travel Travel Candidate Name Disbursement For: Candidate Name Disbursement For: Travel Tra							M = M	T DISDI	D II	D /			Y
Adrington Purpose of Disbursement Travel / Food/Beverage Candidate Name Category/ Type Office Sought: House Prisident Other (specify) ▼ Mailing Address 2800 Shriington Road Sie 1200 City Senate President Category/ Type Date of Disbursement Travel Category/ Type Date of Disbursement Travel Category/ Type Date of Disbursement Travel Category/ Type FEC Identification Number Category/ Type		•					10		03	_		2022	
Purpose of Disbursement Travel / Food/Beverage Cardidate Name Office Sought:		,					FEC Io	lentific	ation	Nun	nber		
Transaction ID : SB21B.43771 Amount of Each Disbursement this Period Office Sought:		1	VA	22206				-	-	_	-	-	
Carlegory/ Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) Short, Catherine, , , Mailing Address 2800 Shirlington Road State: District: Full Name (Last, First, Middle Initial) Short, Catherine, , , Mailing Address 2800 Shirlington Road State: District: Full Name (Last, First, Middle Initial) Short, Catherine, , , Mailing Address 2800 Shirlington Road State: District: District: Full Name (Last, First, Middle Initial) Short, Catherine, , , Mailing Address 2800 Shirlington Road State: District: Dist						ъ.	C						
Office Sought:		ŭ				الجد				_			
Senate Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) B. Short, Catherine, , , Mailing Address 2800 Shirlington Road Ste 1200 City Artington VA 22206 Purpose of Disbursement Travel Candidate Name							Amoun	t of Ea	acn I	Jisbu	rseme	ent this P	eriod
State: District: Other (specify) ▼ Memo Item		Office Sought: House Disburse	ment For:	L			11.					85.47	7
State: District: Full Name (Last, First, Middle Initial) B. Short, Catherine, , , Mailing Address 2800 Shirlington Road Ste 1200 City			Primary	General				,			,		
B. Short, Catherine, , , Mailing Address 2800 Shirlington Road Ste 1200 City Arlington VA Z2206 Purpose of Disbursement Travel Candidate Name Disbursement For: Senate Primary General Other (specify) City Arlington Purpose of Disbursement Travel Candidate Name Disbursement For: Senate Primary General Other (specify) Short, Catherine, , Mailing Address 2800 Shirlington Road Ste 1200 City Arlington Purpose of Disbursement Travel Candidate Name Disbursement For: Senate Primary General Other (specify) Date of Disbursement FEC Identification Number Category/ Type Transaction ID : SB21B.43771 Amount of Each Disbursement this Period Date of Disbursement Travel FEC Identification Number Category/ Type Date of Disbursement this Period FEC Identification Number Condidate Name Date of Disbursement Travel FEC Identification Number Category/ Type FEC Identification Number Category/ Type FEC Identification Number Category/ Type Transaction ID : SB21B.43771 Amount of Each Disbursement this Period FEC Identification Number Category/ Type Condidate Name Category/ Type Office Sought: House Primary General Other (specify) ▼ Senate Primary General Other (specify) ▼ Memo Item Substinct: Substinct: Substinct: Memo Item			Other (spe	cify) ▼			Me	emo Ite	em				
B. Short, Catherine, , , Mailing Address 2800 Shirlington Road Ste 1200 City Arlington VA 22206 Purpose of Disbursement Travel Candidate Name Disbursement For: Senate President Other (specify) Short, Catherine, , , Mailing Address 2800 Shirlington Road Ste 1200 City Arlington Category/ Type Category/ Type Category/ Type Disbursement For: Senate President Other (specify) Short, Catherine, , , Mailing Address 2800 Shirlington Road Ste 1200 City Arlington Purpose of Disbursement For: Short, Catherine, , , Mailing Address 2800 Shirlington Road Ste 1200 City Arlington Office Sought: House Senate Primary General Other (specify) ▼ Short, Catherine, , , Mailing Address 2800 Shirlington Road Ste 1200 City Arlington VA 22206 Office Sought: House Primary General Other (specify) ▼ Senate President State: Disbursement For: Primary General Other (specify) ▼ Substortal of Disbursement This Page (optional)	_									—			
Mailing Address 2800 Shirlington Road Ste 1200 City Arlington Purpose of Disbursement Travel Candidate Name Disbursement For: Senate President State: District: Full Name (Last, First, Middle Initial) C. Short, Catherine, , , Mailing Address 2800 Shirlington Road Ste 1200 City Arlington Purpose of Disbursement For: Senate President State: District: Full Name (Last, First, Middle Initial) C. Short, Catherine, , , Mailing Address 2800 Shirlington Road Ste 1200 City Arlington Purpose of Disbursement Travel Candidate Name Disbursement For: Category/ Type Transaction ID : SB21B.43771 Amount of Each Disbursement Travel Category/ Type Office Sought: House President Other (specify) State Primary General Other (specify) Memo Item Substruct: Substruct: Substruct: Substruct: Amount of Each Disbursement For: Category/ Type Category/ Type Senate President Other (specify) Memo Item Substruct: Memo Item Substruct: Memo Item Substruct: Memo Item Substruct: Substru		•					Date o	f Disb	urser	nent			
Mailing Address 2800 Shirlington Road Ste 1200 City Arlington Purpose of Disbursement Travel Candidate Name Disbursement For: Senate President State: District: Full Name (Last, First, Middle Initial) C. Short, Catherine, , Mailing Address 2800 Shirlington Road Ste 1200 City Arlington Purpose of Disbursement For: Senate Primary General Other (specify) Mailing Address 2800 Shirlington Road Ste 1200 City Arlington Purpose of Disbursement Travel Candidate Name Disbursement Travel Candidate Name Disbursement Travel Candidate Name Disbursement Disbursement Travel Candidate Name Disbursement For: Senate Primary General Other (specify) ▼ Memo Item State: District: Memo Item Substate: Substate: District: Substate: Disbursements This Page (optional)		oriort, Gatherine, , ,					M = M	7/[Y	Y	Y
Arlington Purpose of Disbursement Travel Candidate Name Category/ Type Date of Disbursement Full Name (Last, First, Middle Initial) C. Short, Catherine, , , Mailing Address 2800 Shirlington Road Ste 1200 City Arlington Purpose of Disbursement Travel Candidate Name Category/ Type Transaction ID: SB21B.43771 Amount of Each Disbursement FEC Identification Number FEC Identification Number Category/ Type FEC Identification Number FEC Identification Number Category/ Type Transaction ID: SB21B.43771 Amount of Each Disbursement this Period FEC Identification Number Category/ Type Transaction ID: SB21B.43771 Amount of Each Disbursement this Period FEC Identification Number Category/ Type Separate Primary General President Separate Primary General President State: District: Substate: District: District: Substate: District: District: District: District: Di				10 03 2022									
Purpose of Disbursement Travel Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Short, Catherine, , , Mailing Address 2800 Shirlington Road Ste 1200 City Arlington Purpose of Disbursement Travel Candidate Name Office Sought: House Senate Primary General Other (specify) Transaction ID: SB21B.43771 Amount of Each Disbursement this Period FEC Identification Number Category/ Type Office Sought: House Primary General Other (specify) State: District: Subtrotal of Disbursements This Page (optional)		•		·	FEC Io	lentific	ation	Nun	nber				
Travel Candidate Name Category/ Type Office Sought:			VA	22206		_		-					
Category/ Type Office Sought: House Disbursement For: Senate President Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Short, Catherine, , , Mailing Address 2800 Shirlington Road Ste 1200 City Arlington VA 22206 Purpose of Disbursement Travel Candidate Name Office Sought: House Senate Primary General Other (specify) Type Office Sought: House Disbursement For: Senate Primary General Other (specify) Memo Item Substrate: District: Substrate: District: Amount of Each Disbursement this Period X Memo Item FEC Identification Number Category/ Type Category/ Type X Memo Item Substrate: District: Amount of Each Disbursement this Period X Memo Item Substrate: District: Amount of Each Disbursement Substrate Sub					Ι.	.			: I	D . C	POAD	40774	
Office Sought: House Senate Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Short, Catherine, , , Mailing Address 2800 Shirlington Road Ste 1200 City Arlington Purpose of Disbursement Travel Candidate Name Office Sought: House Disbursement For: Senate Primary General Other (specify) State: District: Type Date of Disbursement FEC Identification Number Category/ Type Transaction ID: SB21B.43771 Amount of Each Disbursement this Period State: District: Suppose of Disbursement For: Senate Primary General Other (specify) Suppose of Disbursement Travel Category/ Type State: District: Memo Item		Candidate Name			Categ	ory/				_		-	eriod
Senate Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Short, Catherine, , , Mailing Address 2800 Shirlington Road Ste 1200 City Arlington Purpose of Disbursement Travel Candidate Name Office Sought: House Primary General Other (specify) State: District: Senate Primary General Other (specify) Memo Item Transaction ID: SB21B.43771 Amount of Each Disbursement this Period X Memo Item State: District: Substate: District: Memo Item 85.47									_	_	-	00.71	
State: District: Full Name (Last, First, Middle Initial) C. Short, Catherine, , , Mailing Address 2800 Shirlington Road Ste 1200 City Arlington Purpose of Disbursement Travel Candidate Name Office Sought: House President Other (specify) State: District: Memo Item Date of Disbursement FEC Identification Number Category/ Type Office Sought: House Primary General Other (specify) State: District: Substock Affington Purpose of Disbursement For: Senate Primary General Other (specify) State: District: Substock Affington Affington FEC Identification Number Category/ Type Amount of Each Disbursement this Period Memo Item 85.47				Conoral							7	29.7)
State: District: Full Name (Last, First, Middle Initial) C. Short, Catherine, , , Mailing Address 2800 Shirlington Road Ste 1200 City Arlington Purpose of Disbursement Travel Candidate Name Office Sought: House President State: District: Substortal of Disbursements This Page (optional)			•										
C. Short, Catherine, , , Mailing Address 2800 Shirlington Road Ste 1200 City Arlington Purpose of Disbursement Travel Candidate Name Category/ Type Office Sought: House Senate Primary General President State: District: Subtotal of Disbursement Subtotal of Disbursement State Zip Code 22206 FEC Identification Number Category/ Type Transaction ID : SB21B.43771 Amount of Each Disbursement this Period X Memo Item			Oo. (opo	Sy,			X Me	emo Ite	em				
Mailing Address 2800 Shirlington Road Ste 1200 City Arlington Purpose of Disbursement Travel Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) ▼ State: District: Substotict: State Zip Code VA 22206 FEC Identification Number Category/ Type Transaction ID : SB21B.43771 Amount of Each Disbursement this Period X Memo Item 85.47		Full Name (Last, First, Middle Initial)											
Ste 1200 City Arlington Purpose of Disbursement Travel Candidate Name Office Sought: House Senate Primary General President Other (specify) ▼ State: District: State Zip Code VA 22206 FEC Identification Number Category/ Type Transaction ID : SB21B.43771 Amount of Each Disbursement this Period X Memo Item 85.47	C.	Short, Catherine, , ,						f Disb		_		Y	Υ
Arlington Purpose of Disbursement Travel Candidate Name Category/ Type Office Sought: House Senate Primary General President Other (specify) State: District: Substitute Name VA 22206 Category/ Type Category/ Type Transaction ID: SB21B.43771 Amount of Each Disbursement this Period We Memo Item 85.47						10	11	03	_	느	2022		
Purpose of Disbursement Travel Candidate Name Category/ Type Office Sought: House Senate Primary General President State: District: Substrict: Memo Item 85.47		-		1 '			FEC Io	lentific	ation	Nun	nber		
Travel Candidate Name Category/ Type Office Sought: House Senate Primary General President Other (specify) ▼ State: District: Substrict: Transaction ID : SB21B.43771 Amount of Each Disbursement this Period X Memo Item 85.47			VA	22206				-	_	_		-	
Candidate Name Category/ Type					Г.			oncod	tion l	ID . C	2D24D	12771	
Office Sought: House Senate Primary General President Other (specify) ▼ Substrict: Memo Item Substrict: Substrict: Substrict: Primary General Other (specify) ▼ Substrict: Memo Item		Candidate Name						_			eriod		
State: Other (specify) State: District: Memo Item SUBTOTAL of Disbursements This Page (optional)		Office Sought: House Disburse	ment For:		.,,,				_	_		24.1	5
State: District: Memo Item SUBTOTAL of Disbursements This Page (optional)		Senate	Primary	General							1	. 4	
State: District: SUBTOTAL of Disbursements This Page (optional)		President	Other (spe	cify) ▼			X Me	emo Ite	em				
30BTOTAL OF DISDUISEMENTS THIS Fage (Optional)	_	State: District:					L						
TOTAL This Period (lest page this line number only)	S	JBTOTAL of Disbursements This Page (optional).				▶				_	 -	85.4	7
	 	OTAL This Davied (last page this line growth	Α.										可

SCHEDULE B (FEC Form 3X)	T		FOR LINE NUMBER: PAGE 99 OF						9 OF 1	
ITEMIZED DISBURSEMENTS		category of the	(orlook orli) orlo)							
		Summary Page	×	21b 28a	22 28b	23 28c	26		27 80b	
Annintermenting period from such Demants and Chate										
Any information copied from such Reports and State or for commercial purposes, other than using the na										
NAME OF COMMITTEE (In Full)										
WOMEN SPEAK OUT PAC										
Full Name (Last, First, Middle Initial)					Data at	: Diaha				
A. Short, Catherine, , ,					M = M		D /	202		
Mailing Address 2800 Shirlington Road Ste 1200					10		13	202	2	
City	State	Zip Code			FEC Id	entificatio	n Numb	er		
Arlington Purpose of Disbursement	VA	22206							_	
Travel-Mileage					С					
Candidate Name				_		nsaction	_		_	
			Category Type	y/	Amoun	of Each	DISDUTS	sement tr	nis Period	
Office Sought: House Disburse	ment For:								79.80	
Senate	Primary	General								
President	Other (spe	ecify) 🔻			Me	mo Item				
State: District:										
Full Name (Last, First, Middle Initial)					Date of	Disburs	amant			
B. Short, Catherine, , ,			Date of		D /	Y	V			
Mailing Address 2800 Shirlington Road Ste 1200			10 13 2022							
City	State	Zip Code			FEC Id	entificatio	n Numb	er		
Arlington Purpose of Disbursement	VA	22206							_	
Travel / Food/Beverage (Partial Below Threshold)			· · ·		С					
Candidate Name			Cotogon			nsaction			76 nis Period	
			Category Type	y'	Amoun	. OI Laci	Disbuis	ement u	iis reilou	
Office Sought: House Disburse	ment For:				Ι.	- 45	1.45	3(00.81	
Senate	Primary	General				,	,			
President State: District:	Other (spe	ecify)			Me	mo Item				
					_					
Full Name (Last, First, Middle Initial) C. Short, Catherine, , ,						Disburs		Y		
Mailing Address 2800 Shirlington Road Ste 1200					10		13	202		
City	State	Zip Code			FEC Id	entificatio	n Numb	er		
Arlington Purpose of Disbursement	VA	22206							_	
Travel - Mileage				C	ınsactio	ı ID : SB	21B.439	7€		
Candidate Name			Category Type	y/	Amount	of Each	Disburs	ement th	nis Period	
Office Sought: House Disburse	ment For:		- 7 6 0	-				2	90.50	
Senate	Primary	General								
President	Other (spe	ecify) ▼			X Me	mo Item				
State: District:					ш					
SUBTOTAL of Disbursements This Page (optional).				>		-		3	880.61	
TOTAL This Period (last page this line number only	<i>/</i>)			_						

SCHEDULE B (FEC Form 3X) TEMIZED DISBURSEMENTS		arate schedule(s)			LINE I	NUMBE one)	R:			PAGE	E 100 C	F 182
TEMPED BIODORGEMENTO		category of the Summary Page		×	21b 28a	22 28k		23 28c		26 29	27 30b	
Any information copied from such Reports and State	mente may i	not be sold or used	h by :	anv								one
or for commercial purposes, other than using the nar												
NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC												
Full Name (Last, First, Middle Initial) Smith, Jodi, , ,						M	M .		D /		Y	Y
Mailing Address 2800 Shirlington Rd	_	I				10		0	_	_	2022	
City Arlington Purpose of Disbursement	State VA	Zip Code 22206					Ident	tificatio	n Nun	nber	-	
State Director Pay Candidate Name		[Cate	gor	v/						3.44168 ent this F	eriod
Office Sought: House Disburse Senate	ment For: Primary	General	Ту	/pe			_	7			8000.0	
State: President State: District:	Other (spec	cify) 🔻				N	/lemo	Item				
Full Name (Last, First, Middle Initial)												
Speedway						Date	of D	isburse	ement		Y	Υ
Mailing Address 500 Speedway Dr						10)	1	4	L	2022	
City Enon Purpose of Disbursement	State OH	Zip Code 45323				-	Ident	tificatio	n Nun	nber	-	
Travel (9/16/22 Usio Inc. Prepaid Debit Card Purch Candidate Name	nase)	[Cate	gor	y/	-					.44685 ent this F	eriod
Office Sought: House Disburse Senate President	ment For: Primary Other (spec	General Cify)	-,	F				7			30.0	0
State: District:						X	/lemc	Item				
Full Name (Last, First, Middle Initial) Starbucks						Date		isburse			YIYI	V
Mailing Address 2401 Utah Avenue South Suite 800						10		0		L	2022	
City	State WA	Zip Code 98134				FEC	Ident	tificatio	n Nun	nber		
Seattle Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Care		1	-	-	\neg	С			Ξ			
Candidate Name		<u> </u>	Cate	gor pe	y/						8.44686 ent this F	eriod
Office Sought: House Senate President State: District:	ment For: Primary Other (spec	General cify) ▼	<u></u>	рс		×	/lemo	tem		-	77.1	1
SUBTOTAL of Disbursements This Page (optional)					<u> </u>					-	8000.0	0
TOTAL This Period (last page this line number only					_	F	Ŧ	7		7		Ħ

SCHEDULE B (FEC Form 3X)	Ī.,		FOR L	INE I	NUMBER:			PAGE	101 OF	182
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the		(check	•					7	
		Summary Page	×	21b	22	23	26		27	
[28a	28b	28c	29		30b	
Any information copied from such Reports and State or for commercial purposes, other than using the nar										
NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC										
Full Name (Last, First, Middle Initial)										
A. Starbucks					Date of	f Disburs	ement /	Y	/ I Y I Y	7
Mailing Address 2401 Utah Avenue South Suite 800					10		06	2	022	
City	State	Zip Code			FEC Id	entification	on Numb	oer		
Seattle Purpose of Disbursement	WA	98134							-	
Food/Beverage (9/16/22 Usio Inc. Prepaid Debit C	ard Purchas	se)			C					
Candidate Name			0-1	./		nsactio	_			riad
			Category Type	y/	Amoun	t of Eaci	DISDUR	semen	t this Pe	rioa
Office Sought: House Disburse	ment For:		71						49.53	
Senate	Primary	General				7				_
President	Other (spe	ecify) ▼			✗ Me	mo Item				
State: District:										
Full Name (Last, First, Middle Initial)					5.	, D				
B. Starbucks					Date of	f Disburs	ement			
Mailing Address 2401 Utah Avenue South Suite 800			10 07 2022							
City	State	Zip Code	EEC Id	entification	on Numb	or				
Seattle	WA	98134		Citimoath	JII INUIIII	Jei	-			
Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit C	ard Purchas	se)			C					
Candidate Name	ara i aronac	50)				nsactio				
Candidate Name			Category Type	y/	Amoun	t of Each	Disbur	semen	t this Pe	riod
Office Sought: House Disburse	ment For:		туре						13.00	П
Senate	Primary	General							785	_
President	Other (spe	ecify)			X Me					
State: District:	ı				NIE	mo Item				
Full Name (Last, First, Middle Initial)										
C. Starbucks					Date of	f Disburs	ement			
					M M		D /		Y Y Y	7
Mailing Address 2401 Utah Avenue South Suite 800					10	_	08	2	022	_
	State	Zip Code								
Seattle	WA	98134			FEC Id	entification	on Numb	oer		
Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit C	ard Purchas	se)	\neg	С						
Candidate Name			y/		ansactio t of Each			t this Pe	riod	
Office Sought: House Disburse	ment For:							80.07		
Senate	Primary	General							- 40	
President	Other (spe	ecify) 🔻			X Me	mo Item				
State: District:	<u> </u>				IVIE	o iteill				
						-	-	-	0.00	
SUBTOTAL of Disbursements This Page (optional).								,	0.00	
TOTAL This Period (last page this line number only	<u> </u>			_					-	\neg

SCHEDULE B (FEC Form 3X)		anata astronti ()	FOR LINE NUMBER: PAGE 102										
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the	(check only] oo	00							
		Summary Page	X 21b 28a	22 28b	23 28c	26 27 29 30b							
Any information conicd from such Deports and	Statements ma:	not be sold or was											
Any information copied from such Reports and or for commercial purposes, other than using the													
NAME OF COMMITTEE (In Full)													
WOMEN SPEAK OUT PAC													
Full Name (Last, First, Middle Initial)				Data of Di	ohuro om on								
A. Starbucks				Date of Di	sbursemen								
Mailing Address 2401 Utah Avenue South				10	08	2022							
Suite 800													
City	State WA	Zip Code		FEC Ident	fication Nu	mber							
Seattle Purpose of Disbursement	VVA	98134											
Food/Beverage (9/16/22 Usio Inc. Prepaid D	ebit Card Purchase	e)		C		0D04D 44000							
Candidate Name			Category/			SB21B.44690 oursement this Period							
			Туре	/pe									
Office Sought: House Dis	bursement For:	Camaval	40										
President	Other (spe	General											
State: District:	Carlor (ope	Sy) ↓		✗ Memo Item									
Full Name (Last, First, Middle Initial)													
B. Starbucks				Date of Di	sbursemen	t							
Mailing Address 2401 Utah Avenue South Suite 800				10 08 2022									
City	State WA	Zip Code 98134		FEC Ident	fication Nu	mber							
Seattle Purpose of Disbursement	VVA	96134		C									
Food/Beverage (9/16/22 Usio Inc. Prepaid D	ebit Card Purchas	e)			action ID :	SB21B.44691							
Candidate Name			Category/ Type			oursement this Period							
Office Sought: House Dis	bursement For:					38.96							
Senate	Primary	General			,	,							
President State: District:	Other (spe	cify)		X Memo	Item								
Full Name (Last, First, Middle Initial)													
C. Starbucks				Date of Di	sbursemen	t							
				M = M /	D D	/ Y Y Y Y Y							
Mailing Address 2401 Utah Avenue South Suite 800				10	09	2022							
City	State	Zip Code		FEC Ident	fication Nu	mber							
Seattle Purpose of Disbursement	WA	98134											
Food/Beverage (9/16/22 Usio Inc. Prepaid D	ebit Card Purchase	e)		C									
Candidate Name			Category/ Type			SB21B.44692 oursement this Period							
Office Sought: House Dis	bursement For:		.,,,,			22.20							
Senate	Primary	General			7	7							
President	Other (spe	cify) 🔻		X Memo	Item								
State: District:													
SUBTOTAL of Disbursements This Page (opti	onal)				T	0.00							
TOTAL This Period (last page this line number	r only)			L									

Use separate schedule(s) Celect only one) Celectic Control Ce	S	CHEDULE B (FEC Form 3X)			F	OR	LINE	NUMBER	:			PAGE	103 OF	182		
Detailed Summary Page 288 280 280 29 300 300 30 30	IT	EMIZED DISBURSEMENTS			le(s) (check only one)											
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) WOMEN SPEAK OUT PAC Full Name (Last, First, Middle Initial) A. Starbucks Mailing Address 2401 Ulah Avenue South Suite 800 City Saatile Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Category/ Type Transaction 10 : \$8218.4693 Anount of Each Disbursement ins Period Transaction 10 : \$8218.4693 Anount of Each Disbursement Full Name (Last, First, Middle Initial) B. Starbucks Mailing Address 2401 Ulah Avenue South Suite 800 City Seatile Pripose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Transaction 10 : \$8218.4694 Anount of Each Disbursement this Period Transaction Inc. State Bendal Transacti						×						L				
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Pati) WOMEN SPEAK OUT PAC Full Name (Last, First, Middle Initial) A. Starbucks Mailing Address 2401 Utah Avenue South Suite 800 City Seattle Propose of Disbursement ProodSeverage (81622 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Category/ Type Disbursement For: Full Name (Last, First, Middle Initial) State: District Full Name (Last, First, Middle Initial) State District Full Name (Last, First, Middle Initial) State District Full Name (Last, First, Middle Initial) State District Full Name (Last, First, Middle Initial) City Seattle Propose of Disbursement FoodSeverage (816/22 Usio Inc. Prepaid Debit Card Purchase) City Seattle Propose of Disbursement FoodSeverage (816/22 Usio Inc. Prepaid Debit Card Purchase) City Seattle Propose of Disbursement FoodSeverage (816/22 Usio Inc. Prepaid Debit Card Purchase) City Seattle Propose of Disbursement FoodSeverage (816/22 Usio Inc. Prepaid Debit Card Purchase) City Seattle Propose of Disbursement FoodSeverage (816/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Transaction ID: S8218.4694 Amount of Each Disbursement 10 2022 FEC Identification Number Category/ Type FoodSeverage (816/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Office Sought FoodSeverage (816/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type FEC Identification Number FEC Identification Number Category/ Type FEC Identification Number FEC Identification Number FEC Identification Number Category/ Type FEC Identification Number FEC	_															
WOMEN SPEAK OUT PAC Full Name (Last, First, Middle Initial) A. Starbucks Mailing Address 2401 Utah Avenue South Suite 800 City Seattle Purpose of Disbursement Foodfeverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Speatile Prinsident State: District: Full Name (Last, First, Middle Initial) B. Starbucks Mailing Address 2401 Utah Avenue South Suite 800 City Seattle Purpose of Disbursement For: Foodfeverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Speatile Prinsident Foodfeverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Office Sought: House Office Sought: Foodfeverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Office Sought: Foodfeverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Office Sought: Foodfeverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Office Sought: Foodfeverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Office Sought: Foodfeverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Office Sought: Foodfeverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Office Sought: Foodfeverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Office Sought: Foodfeverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Office Sought: Foodfeverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Office Sought: Foodfeverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Office Sought: Foodfeverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Foodfeverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Transaction ID: S8218.44698 Amount of Each Disbursement Ins Percod Transaction ID: S8218.44698 Amount of Each Disbursement Ins Percod Transaction ID: S8218.44698 Amount of Each Disbursement Ins Percod Transaction ID: S8218.44698 Amount of Each Disbursement Ins Percod Transaction ID: S8218.44698 Amount of Each Disbursement Ins Percod Transaction ID: S821																
Full Name (Last, First, Middle Initial) A. Starbucks Mailing Address 2401 Utch Avenue South Surie 800 City Seattle Purpose of Disbursement FoodPeverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Category/ State District Full Name (Last, First, Middle Initial) B. Starbucks Mailing Address 2401 Utch Avenue South Surie 800 City Seattle Purpose of Disbursement For: Seattle Seattle Name (Last, First, Middle Initial) B. Starbucks Mailing Address 2401 Utch Avenue South Surie 800 City Seattle Purpose of Disbursement FoodPeverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Category/ Nype Category/ Transaction ID : S8218.44693 Amount of Each Disbursement here Seattle NA Surie 800 City Seattle President President President President President President President President Surie 800 City Seattle President Preside		NAME OF COMMITTEE (In Full)														
As Starbucks Mailing Address 2401 Utah Avenue South Sulte 800 City Seattle Purpose of Disbursement Foodsbeverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Office Sought: Full Name (Last, First, Middle Initial) State: District: Full Name (Last, First, Middle Initial) Furpose of Disbursement Tor: Senate President South																
Mailing Address 2401 Utah Avenue South Suite 800 City Seattle Purpose of Disbursement President State: Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Category/ Sate 10 Subursement this Period Expurpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Categ								D-4	٠D:							
City Seattle Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Cardidate Name City Seattle President State: Disbursement For: Cardidate Name Category Transaction ID: \$82/18.44694 Amount of Each Disbursement this Period FEC Identification Number Category Transaction ID: \$82/18.44693 Amount of Each Disbursement For: Category Transaction ID: \$82/18.44694 Amount of Each Disbursement this Period FEC Identification Number Category Transaction ID: \$82/18.44693 Amount of Each Disbursement this Period FEC Identification Number Category Transaction ID: \$82/18.44693 Amount of Each Disbursement this Period FEC Identification Number Fet Identification Number Category Transaction ID: \$82/18.44694 Amount of Each Disbursement For: Cardidate Name City Seattle Date of Disbursement Fet Identification Number Category Transaction ID: \$82/18.44694 Amount of Each Disbursement FEC Identification Number FET Identification Number Category Transaction ID: \$82/18.44694 Amount of Each Disbursement Fet Identification Number Category Transaction ID: \$82/18.44694 Amount of Each Disbursement FET Identification Number Category Transaction ID: \$82/18.44694 Amount of Each Disbursement Fet Identification Number Category Transaction ID: \$82/18.44694 Amount of Each Disbursement Fet Identification Number Category Transaction ID: \$82/18.44694 Amount of Each Disbursement Fet Identification Number Category Transaction ID: \$82/18.44694 Amount of Each Disbursement Fet Iden	Α.							Date o) 				Y Y Y	7		
Seattle		_						10	_	09	}	느	2022			
Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Category/ Type Office Sought:		,		l .				FEC Io	lenti	fication	ı Nur	nber				
Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Office Sought:			WA	98134					-	-	_		-			
Cardidate Name Office Sought: House Senate Primary General State: District: Walling Address 2401 Utah Avenue South Suite 800 City Seattle District: General Primary General State: District: General General General General Primary General		'	ard Purchase	e)	Г.			C								
Office Sought: House Disbursement For: Senate President Other (specify) Mailing Address 2401 Utah Avenue South Suite 800 State Senate President Senate President Other (specify) Mailing Address 2401 Utah Avenue South Suite 800 State Senate President Senate President Other (specify) Mailing Address 2401 Utah Avenue South Suite 800 State Senate President Senate President Other (specify) Memo Item Senate President State Senate President Other (specify) Memo Item Senate President Suite 800 State Senate President Senate President Senate President Senate President Senate President Senate President Primary General Senate President Senate Sena		Candidate Name		,	<u></u>	-								and an all		
Senate Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) B. Starbucks Mailing Address 2401 Utah Avenue South Suite 800 City Seattle WA 98134 Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Starbucks Mailing Address 2401 Utah Avenue South Suite 800 City Seattle Primary General Other (specify) Memo Item Transaction ID : SB218.44694 Amount of Each Disbursement this Period Transaction ID : SB218.44694 Amount of Each Disbursement Full Name (Last, First, Middle Initial) C. Starbucks Mailing Address 2401 Utah Avenue South Suite 800 City Seattle WA 98134 Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Transaction ID : SB218.44694 Amount of Each Disbursement this Period Transaction ID : SB218.44694 Amount of Each Disbursement this Period Transaction ID : SB218.44694 Amount of Each Disbursement this Period Transaction ID : SB218.44694 Amount of Each Disbursement this Period Transaction ID : SB218.44694 Amount of Each Disbursement this Period Transaction ID : SB218.44694 Amount of Each Disbursement this Period Transaction ID : SB218.44694 Amount of Each Disbursement this Period Transaction ID : SB218.44694 Amount of Each Disbursement this Period Transaction ID : SB218.44694 Amount of Each Disbursement this Period Transaction ID : SB218.44694 Amount of Each Disbursement this Period							ry/	Amoun	it of	Eacn	DISDU	ırseme	ent this Pe	∍riod		
State: District: Other (specify) ▼ State District: District: Date of Disbursement		Office Sought: House Disburse	ment For:			-			_				5.61			
State: District: Full Name (Last, First, Middle Initial) B. Starbucks Mailing Address 2401 Utah Avenue South Suite 800 City Seattle Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Office Sought: House Primary General Primary Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Starbucks Mailing Address 2401 Utah Avenue South Suite 800 City Seattle Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Transaction ID: SB21B.44694 Amount of Each Disbursement this Period Enclosed Primary General Date of Disbursement Date of Disbursement Date of Disbursement Follow Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Office Sought: House Disbursement For: Senate Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Office Sought: House Disbursement For: Senate Primary General Office Sought: Memo Item Main A J Date of Disbursement For Identification Number Category/ Type Office Sought: Memo Item Main A J Date of Disbursement For Identification Number Category/ Type Office Sought: Memo Item Main A J Date of Disbursement Main A J Date of Disbur		Senate	Primary	General						7		,				
Full Name (Last, First, Middle Initial) Starbucks Mailling Address 2401 Utah Avenue South Suite 800 City Seattle Purpose of Disbursement For: Senate President Other (specify) State Via Primary General Seattle Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Category/ Type Office Sought: House District: Full Name (Last, First, Middle Initial) C. Starbucks Mailing Address 2401 Utah Avenue South Suite 800 City Seattle WA 98134 Purpose of Disbursement For: Seattle Disbursement For: Seattle Purpose of Disbursement For: Seattle Disburs			Other (spe	ecify) 🔻				≭ Me	emo	Item						
Mailing Address 2401 Utah Avenue South Suite 800 City Seattle Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Office Sought: Butte 800 Category/ Type Office Sought: District: Full Name (Last, First, Middle Initial) C. Starbucks Mailing Address 2401 Utah Avenue South State: District: Full Name (Last, First, Middle Initial) C. Starbucks Mailing Address 2401 Utah Avenue South Suite 800 City Seattle Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Transaction ID: SB218,44694 Amount of Each Disbursement this Period FEC Identification Number Category/ Type Tec Identification Number FEC Identification Number FEC Identification Number FEC Identification Number FEC Identification Number Category/ Type Transaction ID: SB218,44694 Amount of Each Disbursement FEC Identification Number Category/ Type Office Sought: House Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Office Sought: House Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Transaction ID: SB218,44694 Amount of Each Disbursement C Transaction ID: SB218,44694 Amount of Each Disbursement Mailing Address 2401 Utah Avenue South D Total Com	_															
Mailing Address 2401 Utah Avenue South Suite 800 City Seattle Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Disbursement For: Senate President State: District: Full Name (Last, First, Middle Initial) C. Starbucks Mailing Address 2401 Utah Avenue South Suite 800 City Seattle Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Date of Disbursement Mailing Address 2401 Utah Avenue South Suite 800 City Seattle Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Category/ Type Category/ Type Office Sought: House Disbursement For: Category/ Type Other (specify) Seattle Purpose of Disbursement FEC Identification Number Category/ Type Category/ Type Other (specify) Memo Item Suite 809.81 Substortal of Disbursement his Period State: District: Senate President Other (specify) Memo Item	В.	,			Date o	f Di	sbursei	ment								
Mailing Address 2401 Utah Avenue South Suite 800 City Seattle Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Office Sought: Full Name (Last, First, Middle Initial) C. Starbucks Mailing Address 2401 Utah Avenue South Suite 800 City Seattle Purpose of Disbursement this Period Mailing Address 2401 Utah Avenue South Suite 800 City Seattle Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Date of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type FEC Identification Number FEC Identification Number FEC Identification Number FEC Identification ID: SB21B.44694 Amount of Each Disbursement FEC Identification Number FEC Identification Number Category/ Type FEC Identification Number Category/ Type FEC Identification Number Category/ Type FEC Identification Number Category/ Transaction ID: SB21B.44694 Amount of Each Disbursement this Period FEC Identification Number Category/ Type FEC Identification Number Category/ Type FEC Identification Number Category/ Type FEC Identification ID: SB21B.44694 Amount of Each Disbursement this Period FEC Identification Number Category/ Transaction ID: SB21B.44694 Amount of Each Disbursement this Period FEC Identification Number Category/ Type FEC Identification Number Category/ Type FEC Identification Number FEC Identification Number FEC Identification ID: SB21B.44694 FEC Identification Number Category/ Type FEC Identification Number FILL Number FILL Number Category/ Type FEC Identification Number FILL Number FILL Number FEC Identification Number Category/ Type FEC Identification Number Category/ Type FEC Identification Number FILL Number		Starbucks						M = M					Y W Y W Y	7		
Seattle									10 09 2022							
Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Office Sought: House Senate Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Starbucks Mailing Address 2401 Utah Avenue South Suite 800 City State WA 98134 Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Office Sought: House Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) State: District: Subtrotal of Disbursements This Page (optional)				FEC Io	lenti	fication	ı Nur	nber								
Transaction ID : SB21B.44694 Amount of Each Disbursement this Period Office Sought:			WA		-		_	-	-							
Candidate Name Office Sought: House Disbursement For: Senate Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Starbucks Mailing Address 2401 Utah Avenue South Suite 800 City Seattle WA 98134 Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Office Sought: House Senate Primary General Other (specify) State: District: State: District: State: District: Memount of Each Disbursement this Period FEC Identification Number Category/ Type Transaction ID: SB21B.44694 Amount of Each Disbursement this Period X Memo Item Suite Sought: House Senate Primary General Other (specify) State: District: Substortal of Disbursements This Page (optional)		•	ard Purchas	e)					_							
Office Sought: House Senate Primary General State: District: Full Name (Last, First, Middle Initial) C. Starbucks Mailing Address 2401 Utah Avenue South Suite 800 City Seattle WA 98134 Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Office Sought: House Disbursement For: Senate Primary General Primary General State: District: SUBTOTAL of Disbursements This Page (optional)		Candidate Name			Cate	edoi	ov/							eriod		
Senate Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Starbucks Mailing Address 2401 Utah Avenue South Suite 800 City Seattle Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Office Sought: House Senate Primary General Other (specify) State: District: Substortal of Disbursements This Page (optional)							,	7 11110411		Laon	Diobe		7110 1 0	71100		
State: District: Full Name (Last, First, Middle Initial) C. Starbucks Mailing Address 2401 Utah Avenue South Suite 800 City Seattle Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) State: District: Substortal of Disbursements This Page (optional)													67.68			
State: District: Full Name (Last, First, Middle Initial) C. Starbucks Mailing Address 2401 Utah Avenue South Suite 800 City Seattle Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Office Sought: House Disbursement For: Senate Primary General Ofther (specify) State: District: Memo Item Date of Disbursement FEC Identification Number Category/ Type Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) Memo Item Date of Disbursement FEC Identification Number Category/ Type Memo Item Substitute Substitute Substitute Substitute Substitute Substitute Disbursement For: Senate Primary General Other (specify) Memo Item																
Full Name (Last, First, Middle Initial) C. Starbucks Mailing Address 2401 Utah Avenue South Suite 800 City Seattle Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Office Sought: House Primary Office Sought: State: District: District: Date of Disbursement FEC Identification Number Category/ Type Category/ Type Other (specify) Memo Item Ocupation Ocupation Mailing Address 2401 Utah Avenue South Disbursement FEC Identification Number Category/ Transaction ID: SB21B.44694 Amount of Each Disbursement this Period Memo Item Ocupation Ocupation Memo Item Ocupation Ocupation In the proof Disbursement of the primary ocupation ocupation occupation occupatio			Other (spe	ciry)				X Me	emo	Item						
C. Starbucks Mailing Address 2401 Utah Avenue South Suite 800	_															
Mailing Address 2401 Utah Avenue South Suite 800 City Seattle Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Office Sought: House President President State: District: Substate: District: District: District: 10 10 2022 FEC Identification Number Category/ Type Category/ Type FEC Identification Number Category/ Transaction ID: SB21B.4469 Amount of Each Disbursement this Period X Memo Item	C.								_							
City Seattle Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Category/ Type Office Sought: House Senate President President State: District: State: Disbursements This Page (optional)		_							′							
Seattle Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Category/ Type Office Sought: House Senate Primary General Primary General Other (specify) ▼ State: District: State: Disbursements This Page (optional)			State	Zip Code				FFC Is	lonti	fication	Nlur					
Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) State: District: Substrict: Memo Item Occupant Separate Primary General Other (specify) Substrict: Memo Item			WA	98134				FEC IC	enu	lication	ivui	libei				
Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼ Substrict: Memo Item Category/ Type Amount of Each Disbursement this Period Fresident Other (specify) ▼ Substrict: 0.000			ard Purchase		ane	action	ID · ·	SR21B	4469							
Office Sought: House Disbursement For: Senate Primary General Other (specify) Subtrotal of Disbursements This Page (optional)		Candidate Name												eriod		
State: Other (specify) Substrict: Memo Item Other (specify) Memo Item Output Ou		Office Sought: House Disburse	ment For:		•	2 fr =					_		69.81			
State: District: Memo Item SUBTOTAL of Disbursements This Page (optional)		Senate	Primary	General						,						
SUBTOTAL of Disbursements This Page (optional)			Other (spe	ecify) 🔻				X Me	emo	Item						
SOBTOTAL OF DISDUISEMENTS THIS Fage (Optional)		State: District:														
TOTAL This Paried (last page this line number only)	s	SUBTOTAL of Disbursements This Page (optional)					•			7	_	7	0.00)		
	Ļ	OTAL This Davied (lost page this line must be such as	Α.											一		

S	CHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 104 OF 1						F 182			
IT	EMIZED DISBURSEMENTS		arate schedule(s) category of the	the Constitution of the Co									
			Summary Page		×	21b 28a	22 28b		23 28c		26 29	27 30b	
Γ _Λ	Chata												
	ny information copied from such Reports and States for commercial purposes, other than using the nar												
\setminus	NAME OF COMMITTEE (In Full)												
	WOMEN SPEAK OUT PAC												
٨	Full Name (Last, First, Middle Initial)						Doto	t Di	oburoo	mont			
Α.	Starbucks						M M	וט זו	sburse			Y Y Y	Y
	Mailing Address 2401 Utah Avenue South Suite 800						10	_	11	ı	L.	2022	_
	,	State	Zip Code				FEC Id	lenti	fication	Nur	nber		
	Seattle	WA	98134									-	
	Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	ard Purchas	se)			\neg	C						
	Candidate Name			Ļ	_	-11						.44696	
	Sandidate Harrie			Cate T	ego: ype	ry/	Amour	t of	Each	Disbu	ırseme	ent this Pe	eriod
	Office Sought: House Disburse	ment For:							-		7	38.72	1
	Senate	Primary	General										
	State: District:	Other (spe	ecity) 🔻				X Me	emo	Item				
	Full Name (Last, First, Middle Initial)												
В.	Starbucks						Date o	f Di	sburse			Y Y Y Y	v -
	Mailing Address 2401 Utah Avenue South Suite 800		10 12 2022										
	City Seattle	State Zip Code WA 98134						lenti	fication	ı Nun	nber		
	Purpose of Disbursement		_	С									
	Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	ard Purchas	se)	Ι.		-11		ansa	ection	ID · S	SB21B	44697	
	Candidate Name			Cat		ry/						ent this Pe	eriod
	Office Cought: House Dishurs			T	ype					_		15.00	, —
	Office Sought: House Disbursel Senate	ment For: Primary	General					-		_	7	13.00	
	President	Other (spe					V						
	State: District:						X Me	emo	Item				
$\overline{}$	Full Name (Last, First, Middle Initial)							, D.					
C.	Starbucks						Date o	_	sburse			Y Y Y	
	Mailing Address 2401 Utah Avenue South Suite 800						10		13			2022	
		State	Zip Code					lonti	fication	Nlur			
	Seattle	WA	98134				FEC Id	ıer III	ncation	ivun	innet.		
	Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	ard Purchas	C	onc	notion	ID . (CD24D	.44698					
	Candidate Name							ent this Pe	eriod				
	Office Sought: House Disburse	ment For:		'	ype							22.74	
	Senate	Primary	General						,			- 45	
	President	Other (spe	ecify) 🔻				X Me	emo	Item				
_	State: District:						L						
s	SUBTOTAL of Disbursements This Page (optional)					•		Ť				0.00	0
H	<u> </u>						$\overline{}$	÷	7	=	7	1 1	一
Ιт	OTAL This Period (last page this line number only)											

Use separate schedulide; Circlock only one) Circlock only one Circlock only one) Circlock one Circlock only one Circlock	S	CHEDULE B (FEC Form 3X)			F	OR	LINE	NUMBER	:			PAGE	105 OF	182		
Detailed Summary Page	IT	EMIZED DISBURSEMENTS	for each category of the			_	_									
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) WOMEN SPEAK OUT PAC Full Name (Last, First, Middle Initial) A. Starbucks Mailing Address 2401 Ush Avenue South Suite 800 City Seattle Purpose of Disbursement FoodBeverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Office Sought House Primary Primary Other (specify) State Primary Other (specify) State Primary Office Sought House Primary State District Full Name (Last, First, Middle Initial) B. Starbucks Mailing Address 2401 Ush Avenue South Suite 800 City Seattle Primary Office Sought House Primary Office Sought Santa Primary Office Sought House Primary Office Sought Siate: District Full Name (Last, First, Middle Initial) C. Starbucks Mailing Address 2401 Ush Avenue South Suite 800 City Seattle Primary Office Sought House Primary Office Sought Siate: District Full Name (Last, First, Middle Initial) C. Starbucks Mailing Address 2401 Ush Avenue South Suite 800 City Seattle Primary Office Sought House Primary Office Sought Suite 800 City Sate Primary Office Sought House Primary Office Sought WA 98134 FEC Identification Number Cradiation Number Cradiation Number Cradiation Number Cradiation Number Cradiation Number Cradiation Number						×						L				
A Starbucks Malling Address 2401 Utah Avenue South State: District Full Name (Last, First, Middle Initial) State District State: District Full Name (Last, First, Middle Initial) State State State State: District State: District Full Name (Last, First, Middle Initial) State State State State: District Fundseverage (M1622 Usio Inc. Prepaid Debit Card Purchase) FroudSeverage (M1622 Usio Inc. Prepaid Debit Card Purchase) Full Name (Last, First, Middle Initial) State: District Full Name (Last, First, Middle Initial) State: District Full Name (Last, First, Middle Initial) State: District Full Name (Last, First, Middle Initial) State: District Full Name (Last, First, Middle Initial) State: District Full Name (Last, First, Middle Initial) State: District Full Name (Last, First, Middle Initial) State: District Full Name (Last, First, Middle Initial) State: District Full Name (Last, First, Middle Initial) State: District Full Name (Last, First, Middle Initial) State: District Full Name (Last, First, Middle Initial) State: District Full Name (Last, First, Middle Initial) State: District Full Name (Last, First, Middle Initial) State: District Full Name (Last, First, Middle Initial) State: District Full Name (Last, First, Middle Initial) State: District Full Nam	_															
WOMEN SPEAK OUT PAC Full Name (Last, First, Middle Initial) A. Starbucks Mailing Address 2401 Utah Avenue South Suite 800 City Seattle Purpose of Disbursement Foodfbeverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Office Sought: House President State Disbursement Foodfbeverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Office Sought: House President Suite 800 City Seattle President Suite 800 City Seattle President Suite 800 City Seattle Office Sought: House Disbursement Foodfbeverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Office Sought: House Office Sought: President State: District: Full Name (Last, First, Middle Initial) B. Starbucks Mailing Address 2401 Utah Avenue South Suite 800 City Seattle Office Sought: President State: District Full Name (Last, First, Middle Initial) Category/ Type Office Sought: Full Name (Last, First, Middle Initial) Category/ Type Category/ Type Office Sought: Fell Name (Last, First, Middle Initial) Category/ Type Office Sought: Fell Name (Last, First, Middle Initial) Category/ Type Office Sought: Fell Name (Last, First, Middle Initial) City Seattle District Full Name (Last, First, Middle Initial) City Seattle District Fell Name (Last, First, Middle Initial) City Seattle District Fell Name (Last, First, Middle Initial) City Seattle District Fell Name (Last, First, Middle Initial) City Seattle District Fell Name (Last, First, Middle Initial) City Seattle District Fell Name (Last, First, Middle Initial) City Seattle District Fell Name (Last, First, Middle Initial) City Seattle District Fell Name (Last, First, Middle Initial) Category/ Type Office Sought: Memo Item Transaction ID: S8218.4470f Amount of Each Disbursement Initial Memo Item Transaction ID: S8218.4470f Amount of Each Disbursement Initial Memo Item Transaction ID: S8218.4470f Amount of Each Disbursement Initial Memo Item Transaction ID: S8218.4470f Amount of Each Disbursement Initial Memo Item Transactio																
A. Starbucks Mailing Address 2401 Utah Avenue South Sulte 800 City Seattle Purpose of Disbursement FoodBeverage (9/16/22 Uslo Inc. Prepaid Debit Card Purchase) Candidate Name Category/ Type Category/ Seattle District Full Name (Last, First, Middle Initial) Full Name (Last, First, Middle Initial) State: District Full Name (Last, First, Middle Initial) C. Starbucks Mailing Address 2401 Utah Avenue South Suite 800 City Seattle Priesident Category/ Type Category/ Category/ Type Category/ Transaction ID : \$8218.44599 Amount of Each Disbursement this Period FEC Identification Number Category/ Type Category/ Transaction ID : \$8218.44700 Amount of Each Disbursement Category/ Type Category/ Type Category/ Type Category/ Transaction ID : \$8218.44700 Amount of Each Disbursement FoodBeverage (9/16/22 Uslo Inc. Prepaid Debit Card Purchase) Category/ Transaction ID : \$8218.44700 Amount of Each Disbursement this Period FEC Identification Number Category/ Type Category/ Transaction ID : \$8218.44700 Amount of Each Disbursement this Period Transaction ID : \$8218.44700 Amount of Each Disbursement this Period Transaction ID : \$8218.44700 Amount of Each Disbursement this Period Transaction ID : \$8218.44700 Amount of Each Disbursement this Period Transaction ID : \$8218.44700 Amount of Each Disbursement this Period Transaction ID : \$8218.44700 Amount of Each Disbursement this Period Transaction ID : \$8218.44701 Amount of Each Disbursement this Period Transaction ID : \$8218.44701 Amount of Each Disbursement this Period Transaction ID : \$8218.44701 Amount of Each Disbursement this Period Transaction ID : \$8218.44701 Amount of Each Disbursement this Period Transaction ID : \$8218.44701 Amount of Each Disbursement this Period Transaction ID : \$8218.44701 Amount of Each Disbursement this Period Transaction ID : \$8218.44701 Amount of Each Disbursement this Period Transaction ID : \$8218.44701 Amount of Each Disbursement this Period Transaction ID : \$8218.44701 Amount of Each Disbursement this Period		, ,														
Mailing Address 2401 Utah Avenue South Suite 800 City Seattle Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Office Sought: House Disbursement For: Senate Prisident State: District: Full Name (Last, First, Middle Initial) State Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Transaction ID : SB218.44699 Amount of Each Disbursement fins Period Transaction ID : SB218.44699 Amount of Each Disbursement fins Period WM partial Mailing Address 2401 Utah Avenue South Suite 800 City Seattle Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Candidate Name City Seantle President State: District: Full Name (Last, First, Middle Initial) C Starbucks Mailing Address 2401 Utah Avenue South Suite 800 City Seattle District: Full Name (Last, First, Middle Initial) C Starbucks Mailing Address 2401 Utah Avenue South Suite 800 City Seattle President State: District: Full Name (Last, First, Middle Initial) C Starbucks Mailing Address 2401 Utah Avenue South Suite 800 City Seattle WA 98134 Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Category/ Transaction ID : SB218.44701 Amount of Each Disbursement for: Candidate Name Category/ Amount of Each Disbursement for: Candidate Name Category/ Amount of Each Disbursement for: Candidate Name Category/ Amount of Each Disbursement for: Seattle District: Substortal of Disbursement for: Sacrate Primary Category/ Amount of Each Disbursement for: Seattle District: Substortal of Disbursement for: Seattle District: Substortal of Disb	_	Full Name (Last, First, Middle Initial)														
City Seattle Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Cardidate Name Office Sought:	Α.	Starbucks						Date o	f Di				Y Y Y Y			
Seattle		-						10	_	14	1	L	2022			
Purpose of Disbursement FoodBeverage (9/16/22 Uslo Inc. Prepaid Debit Card Purchase) Cardidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Disbursement Tis Page (9/16/22 Uslo Inc. Prepaid Debit Card Purchase) Full Name (Last, First, Middle Initial) B. Starbucks Mailing Address 2401 Utah Avenue South Suite 800 City Seattle WA		,		· '				FEC Id	lenti	fication	Nur	nber				
Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Office Sought: House President Other (specify) ▼ B. Starbucks Mailing Address 2401 Utah Avenue South State: Disbursement For: Senate President State: District:			VVA	98134						-	_					
Cartegory/ Type Office Sought: House Senate Primary General Primary General Primary General State: District: Full Name (Last, First, Middle Initial) B. Starbucks Mailing Address 2401 Utah Avenue South Suite 800 City Seattle WA 98134 Purpose of Disbursement WA 98134 Primary General State: District: Full Name (Last, First, Middle Initial) C. Starbucks Mailing Address 2401 Utah Avenue South Suite 800 City Seattle District: District: Full Name (Last, First, Middle Initial) C. Starbucks Mailing Address 2401 Utah Avenue South Suite 800 City Seattle WA 98134 Purpose of Disbursement For: Seattle Primary General Primary Gene		•	ard Purchas	e)					_							
Office Sought: House Senate Primary General President State: District: Full Name (Last, First, Middle Initial) B. Starbucks Mailing Address 2401 Utah Avenue South Suite 800 City Seattle Prupose of Disbursement For: Gategory/ Candidate Name Office Sought: House Disbursement For: Senate Primary General Primary General President Suite 800 Cty State: District: Senate President Suite 800 Cty State: Disbursement For: Gategory/ Type Transaction ID: S821B.44700 Amount of Each Disbursement this Period Transaction ID: S821B.44700 Amount of Each Disbursement this Period Transaction ID: S821B.44700 Amount of Each Disbursement this Period Transaction ID: S821B.44700 Amount of Each Disbursement this Period Transaction ID: S821B.44700 Amount of Each Disbursement this Period Transaction ID: S821B.44700 Amount of Each Disbursement this Period Transaction ID: S821B.44700 Amount of Each Disbursement To office Sought: House Disbursement For: Gategory/ Type Office Sought: House Disbursement For: Senate President Other (specify) Type Office Sought: House Disbursement For: Senate President Other (specify) Memolitem SubstoriaL of Disbursement This Page (optional)		Candidate Name										oriod				
State: District: Full Name (Last, First, Middle Initial) B. Starbucks Mailing Address 2401 Utah Avenue South Suite 800 City Seattle WA 98134 Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name District: Full Name (Last, First, Middle Initial) Date of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Other (specify) X Memo Item FEC Identification Number Category/ Amount of Each Disbursement this Period X Memo Item Date of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) City Seattle District: Full Name (Last, First, Middle Initial) C. Starbucks Mailing Address 2401 Utah Avenue South Suite 800 City Seattle WA 98134 Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) City Seattle Type Code WA 98134 FEC Identification Number Common of Each Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Office Sought: House Disbursement For: Senate Primary General Primary General President State: District: Substrottal of Disbursements This Page (optional)							'y/	Afflour	it oi	Each	וטאוט	urseme	ent this Pe	eriou		
State: District: Other (specify) Full Name (Last, First, Middle Initial) B. Starbucks Mailing Address 2401 Utah Avenue South Suite 800 City Seattle Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Other (specify) Transaction ID : SB21B.44700 Amount of Each Disbursement this Period Transaction ID : SB21B.44700 Amount of Each Disbursement this Period Transaction ID : SB21B.44700 Amount of Each Disbursement this Period Transaction ID : SB21B.44700 Amount of Each Disbursement this Period Transaction ID : SB21B.44700 Amount of Each Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) C. Starbucks Mailing Address 2401 Utah Avenue South Suite 800 City Seattle Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Transaction ID : SB21B.44701 Amount of Each Disbursement this Period Transaction ID : SB21B.44701 Amount of Each Disbursement this Period Transaction ID : SB21B.44701 Amount of Each Disbursement this Period Transaction ID : SB21B.44701 Amount of Each Disbursement this Period Transaction ID : SB21B.44701 Amount of Each Disbursement this Period Transaction ID : SB21B.44701 Amount of Each Disbursement this Period Transaction ID : SB21B.44701 Amount of Each Disbursement this Period Transaction ID : SB21B.44701 Amount of Each Disbursement this Period Transaction ID : SB21B.44701 Amount of Each Disbursement this Period		Office Sought: House Disburse	ment For:			-			_			_	3.00			
State: District: Full Name (Last, First, Middle Initial) B. Starbucks Mailing Address 2401 Utah Avenue South Suite 800 City Seattle Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Office Sought: House Disbursement For: Senate Primary General Primary General President Suite 800 Cty Seattle Mailing Address 2401 Utah Avenue South Suite 800 Cty Starbucks Mailing Address 2401 Utah Avenue South Suite 800 Cty Starbucks Mailing Address 2401 Utah Avenue South Suite 800 Cty Seattle Purpose of Disbursement For: Senate Primary General Primary General Purchase) Category/ Type Date of Disbursement Memo Item Date of Disbursement Memo Item Date of Disbursement Memo Item Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Office Sought: House Disbursement For: Senate Primary General P		Senate	Primary	General						,		7				
Full Name (Last, First, Middle Initial) B. Starbucks Mailing Address 2401 Utah Avenue South Suite 800 City Seattle Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Category/ Type Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) C. Starbucks Mailing Address 2401 Utah Avenue South Suite 800 City Seattle Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Transaction ID: SB218.44700 Amount of Each Disbursement this Period Full Name (Last, First, Middle Initial) C. Starbucks Mailing Address 2401 Utah Avenue South Suite 800 City Seattle Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Office Sought: House Pirmary General Primary General President State: District: Memo Item Suite 800 Suite 800 State Primary General Primary Memo Item Substitute Memo Item Suite 800 Suite 800 Suite 800 Suite 800 Suite 800 Suite 800 State Senate Primary General Primary General Primary General Primary General Primary Memo Item Suite 800 Suite 8			Other (spe	ecify) 🔻				X Me	emo	Item						
B. Starbucks Mailing Address 2401 Utah Avenue South Suite 800 City Seattle Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Office Sought: Persident State: District: Full Name (Last, First, Middle Initial) C. Starbucks Mailing Address 2401 Utah Avenue South Suite 800 City Seattle Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type District: Full Name (Last, First, Middle Initial) C. Starbucks Mailing Address 2401 Utah Avenue South Suite 800 City Seattle Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Office Sought: House Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Transaction ID: SB21B.44701 Amount of Each Disbursement this Period Category/ Type Office Sought: House President Senate President Other (specify) Senate President State: District: SubstortAL of Disbursements This Page (optional)	_															
Mailing Address 2401 Utah Avenue South Suite 800 City Seattle Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Category/ Type Office Sought: House Primary General Primary General Suite 800 City Seattle Purpose of Disbursement For: State: District: Full Name (Last, First, Middle Initial) C. Starbucks Mailing Address 2401 Utah Avenue South Suite 800 City Seattle Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Date of Disbursement FEC Identification Number Category/ To 10 FEC Identification Number Fec Identification ID: SB21B.44701 Amount of Each Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Office Sought: House Primary General President Primary General Other (specify) ▼ State: District: Senate Primary General Other (specify) ▼ Substorement For: Senate Primary General Other (specify) ▼ Memo Item Substorements This Page (optional)	D	,						Doto	f Di	oburoo	mant					
Mailing Address 2401 Utah Avenue South Suite 800 City Seattle Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Office Sought: Fell Name (Last, First, Middle Initial) C. Starbucks Mailing Address 2401 Utah Avenue South Suite 800 City Seattle Purpose of Disbursement For: Senate Primary General Other (specify) State District: Full Name (Last, First, Middle Initial) C. Starbucks Mailing Address 2401 Utah Avenue South Suite 800 City Seattle Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Category/ Type FEC Identification Number Fec Disbursement Fec Identification ID: SB21B.44701 Fec Identification ID: SB21B.44701 Amount of Each Disbursement this Period FEC Identification Number Category/ Type Transaction ID: SB21B.44701 Amount of Each Disbursement this Period Senate Primary General Primary General Other (specify) ▼ Subtrotal of Disbursement this Period Subtrotal of Disbursements This Page (optional)	Ь.	Starbucks						Date C	וט וי							
Seattle																
Seattle Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Office Sought: House Senate Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Starbucks Mailing Address 2401 Utah Avenue South Suite 800 City Seattle WA 98134 Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Date of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Office Sought: House Disbursement Foo: Senate Primary General Other (specify) Memo Item Face Identification Number Category/ Type Office Sought: House Disbursement Foo: Senate Primary General Other (specify) Memo Item Substortal of Disbursement This Page (optional)		City	State	FEC. Id	lanti	fication	Niur	nhar								
Transaction ID : SB21B.44700 Amount of Each Disbursement this Period Transaction ID : SB21B.44700 Amount of Each Disbursement this Period Transaction ID : SB21B.44700 Amount of Each Disbursement this Period Transaction ID : SB21B.44700 Amount of Each Disbursement this Period Transaction ID : SB21B.44700 Amount of Each Disbursement this Period Transaction ID : SB21B.44700 Amount of Each Disbursement this Period Transaction ID : SB21B.44700 Transaction ID : SB21B.44700 Transaction ID : SB21B.44700 Transaction ID : SB21B.44701 Amount of Each Disbursement Transaction ID : SB21B.44701 Amount of Each Disbursement this Period Transaction ID : SB21B.44701 Amount of Each Disbursement this Period Transaction ID : SB21B.44701 Amount of Each Disbursement this Period Transaction ID : SB21B.44701 Amount of Each Disbursement this Period Transaction ID : SB21B.44701 Amount of Each Disbursement this Period Transaction ID : SB21B.44701 Amount of Each Disbursement this Period Transaction ID : SB21B.44701 Amount of Each Disbursement this Period Transaction ID : SB21B.44701 Amount of Each Disbursement this Period Transaction ID : SB21B.44701 Amount of Each Disbursement this Period Transaction ID : SB21B.44701 Amount of Each Disbursement this Period Transaction ID : SB21B.44701 Amount of Each Disbursement this Period Transaction ID : SB21B.44701 Amount of Each Disbursement this Period Transaction ID : SB21B.44701 Amount of Each Disbursement this Period			WA													
Candidate Name Office Sought: House Disbursement For: Senate President State: District: Full Name (Last, First, Middle Initial) C. Starbucks Mailing Address 2401 Utah Avenue South Suite 800 City Seattle WA 98134 Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Office Sought: House Disbursement For: Senate Primary General Primary General Other (specify) Seattle WA 98134 FEC Identification Number Category/ Type Transaction ID: SB218.44701 Amount of Each Disbursement this Period Senate Primary General Other (specify) ▼ Senate Primary General Other (specify) ▼ Subtrotal of Disbursements This Page (optional)		•	ard Purchas	se)				C								
Office Sought: House Senate Primary General Other (specify) State: District: Date of Disbursement Full Name (Last, First, Middle Initial) C. Starbucks Mailing Address 2401 Utah Avenue South Suite 800 City Seattle Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Disbursement For: Senate Primary General Other (specify) Type State: District: Memo Item Subtrotal of Disbursements This Page (optional) Memo Item Subtrotal of Disbursements This Page (optional) Disbursements This Page (optional) Memo Item		Candidate Name		,			·y/							eriod		
Senate Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Starbucks Mailing Address 2401 Utah Avenue South Suite 800 City Seattle Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Office Sought: House Disbursement For: Senate Primary General Other (specify) Memorited State: District: Subtotal Primary General Other (specify) Memorited Subtraction Number Subtotal Primary General Other (specify) Memorited Subtraction Number Subtraction Num		Office Sought: House Disburse	ment For:		•	урс							29.85			
State: District: Full Name (Last, First, Middle Initial) C. Starbucks Mailing Address 2401 Utah Avenue South Suite 800 City Seattle Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Office Sought: House Disbursement For: Senate Primary General Other (specify) State: District: Memo Item Date of Disbursement FEC Identification Number Category/ Type Transaction ID: SB21B.44701 Amount of Each Disbursement this Period X Memo Item Subtrotal of Disbursements This Page (optional)				General						7	-	7	1 40	_		
State: District: Full Name (Last, First, Middle Initial) C. Starbucks Mailing Address 2401 Utah Avenue South Suite 800 City Seattle Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) State: District: Substortal of Disbursements This Page (optional)		President	Other (spe	ecify)				X M	mo	Itom						
C. Starbucks Mailing Address 2401 Utah Avenue South Suite 800 City Seattle Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Category/ Type Office Sought: House President State: District: Date of Disbursement FEC Identification Number Category/ Type Transaction ID: SB21B.44701 Amount of Each Disbursement this Period X Memo Item SUBTOTAL of Disbursements This Page (optional)	_	State: District:	'					VV IVIO	21110	Itom						
Mailing Address 2401 Utah Avenue South Suite 800 City Seattle Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Office Sought: House Senate Primary President State: District: SUBTOTAL of Disbursements This Page (optional)	C.							Date o	f Di	sburse	ment					
Suite 800 City Seattle Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Office Sought: House Senate President President State: District: Substate Zip Code 98134 FEC Identification Number Category/ Type Transaction ID: SB21B.44701 Amount of Each Disbursement this Period X Memo Item 0.000								M M	1	D	D	Y				
Seattle Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Category/ Type Office Sought: House Senate Primary General President State: District: Substrict: Manual Manual Precident Inclination Number Category/ Type Transaction ID: SB21B.44701 Amount of Each Disbursement this Period Memo Item 0.00		-						10	_	15	5	Ь	2022	_		
Seattle Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Category/ Type Office Sought: House Senate Primary President State: District: Substrict: Substrict: WA 98134 C Transaction ID: SB21B.44701 Amount of Each Disbursement this Period Type Memo Item 0.00								FEC Id	lenti	fication	Nur	nber				
Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) State: District: Substraction ID: SB21B.44701 Amount of Each Disbursement this Period X Memo Item 0.00			WA	98134									-			
Office Sought: House Senate Primary General Other (specify) W Memo Item State: District: Memo Item Substract Disbursement For: 3.18		Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	Card Purchase)						ans	action	ID : :	SB21B	3.4470 1			
Senate Primary General Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)		Candidate Name		γ/	Amour	t of	Each	Disb	urseme	ent this Pe	eriod					
State: District: Other (specify) SUBTOTAL of Disbursements This Page (optional)		Office Sought: House Disburse	ment For:							,		7	3.18	i		
State: District: Memo Item SUBTOTAL of Disbursements This Page (optional)		Senate	Primary	General						,		,				
SUBTOTAL of Disbursements This Page (optional)			Other (spe	ecify) 🔻				X Me	emo	Item						
SOBTOTAL OF DISDUISEMENTS THIS Fage (Optional)	_	State: District:														
TOTAL This Paried (last page this line number only)	s	SUBTOTAL of Disbursements This Page (optional)					•		Ι	7		7	0.00)		
	乚	COTAL This David float many this live much	Α.							-				可		

S	CHEDULE B (FEC Form 3X)			FC	DR I	LINE	NUMBER	:			PAGE	106 OF	182		
IT	EMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the		(cł		only		_	7						
			Summary Page		X	21b	22		23		26	27			
_						28a	28b		28c		29	30b			
	ny information copied from such Reports and State for commercial purposes, other than using the nar														
	NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC														
_	Full Name (Last, First, Middle Initial)														
Α.	Starbucks						Date o	f Di	sburse			Y Y Y Y			
	Mailing Address 2401 Utah Avenue South Suite 800						10	_	16	3	<u> </u>	2022			
	,	State	Zip Code				FEC Id	lenti	fication	Nur	nber				
	Seattle Purpose of Disbursement	WA	98134					-	-	_					
	Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	ard Purchas	se)				С								
	Candidate Name				_	-						.44702	ام داند ما		
				Cate Tv	egor /pe	y/	Amour	it oi	Eacn	DISDI	ırseme	ent this Pe	erioa		
	Office Sought: House Disburse	ment For:			-							93.39			
	Senate	Primary	General						,		7				
	President	Other (spe	ecify) 🔻				X Me	emo	Item						
_	State: District:														
_	Full Name (Last, First, Middle Initial)						Б.	, D.							
В.	Starbucks					Date o	t Di	sburse	ment						
	Mailing Address 2401 Utah Avenue South Suite 800							10 16 2022							
	City	State	FEC Id	lonti	fication	Niur	mbor								
	Seattle	WA		Citti	lication	I INUI	TIDEI								
	Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit C	ard Purchas	:e)	-			C								
	Candidate Name		,,,		_						SB21B.				
	Canadate Name			Cate	egor /pe	y/	Amour	t of	Each	Disbu	ırseme	ent this Pe	∍riod		
	Office Sought: House Disburse	ment For:		1 9	/pe							68.14			
	Senate	Primary	General								7	1 /45			
	President	Other (spe	ecify)				X Me		Item						
	State: District:						- IVIE	31110	item						
	Full Name (Last, First, Middle Initial)														
C.	Starbucks						Date o	f Di	sburse	ment					
	AA W. A LL						M M	1	D	_		Y Y Y			
	Mailing Address 2401 Utah Avenue South Suite 800						10	-	17			2022	_		
		State	Zip Code						· ·						
	Seattle	WA	98134				FEC Id	enti	tication	Nur	nber				
	Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	ard Purchas		C	_			22.42							
	Candidate Name		Category/ Type								SB21B urseme	ent this Pe	eriod		
	Office Sought: House Disburse	ment For:		· y	, 20							23.22			
	Senate	Primary	General						7		7	- 40			
	President	Other (spe	ecify) 🔻				X Me	mo	Item						
_	State: District:	<u> </u>					I IVIE	J111U	non1						
									-	-			$\overline{}$		
8	SUBTOTAL of Disbursements This Page (optional)					•					7	0.00	J		
Γ.	OTAL This Period (last page this line number only	۸				_		Т					\neg		
	VIAL THIS FERIOU HASE DADE HIS LINE NUMBER ONLY	1						_	_		_				

S	CHEDULE B (FEC Form 3X)			F	OR	LINE	NUMBER	₹:			PAGE	107 OF	- 182		
IT	EMIZED DISBURSEMENTS		arate schedule(s) category of the	(0		k only		_	٦						
			Summary Page		X		22		23		26	27 20h			
_		1				28a	28b		28c		29	30b			
	ny information copied from such Reports and States for commercial purposes, other than using the nar														
	NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC														
\angle	Full Name (Lock First Middle In Ma)														
Α.	Full Name (Last, First, Middle Initial) Starbucks						Date	of D	sburse			Y Y Y			
	Mailing Address 2401 Utah Avenue South Suite 800						10		18			2022			
	,	State	Zip Code				FEC I	dent	ification	ı Nur	nber				
	Seattle Purpose of Dishuraement	WA	98134					-	-	_		-			
	Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	ard Purchas	e)				C								
	Candidate Name		,	٠.	_				action						
					ego ype	ry/	Amou	nt of	Each	DISDL	ırseme	ent this Pe	erioa		
	Office Sought: House Disburse	ment For:					L		-		-	40.21			
	Senate	Primary	General								,				
	President State: District:	Other (spe	ecify) 🔻				X	lemo	Item						
_	Full Name (Last, First, Middle Initial)														
В.	Starbucks						Date	of D	sburse			Y . Y . Y			
	Mailing Address 2401 Utah Avenue South Suite 800							10 19 2022							
	City Seattle	State Zip Code WA 98134						dent	ification	ı Nur	nber				
	Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	ard Durchae	.0)		-	\neg	C								
	Candidate Name	aru i dicilas			egoi	ry/			action Each			.44706 ent this Pe	əriod		
	Office Sought: House Disburse	ment For:		- 1	ype							84.06			
	Senate	Primary	General							_		1 4	_		
	State: President District:	Other (spe	ecity)				X	lemo	Item						
	Full Name (Last, First, Middle Initial) Starbucks						Date	of Di	sburse	ment					
٠.	Starbucks						M		D			Y Y Y			
	Mailing Address 2401 Utah Avenue South Suite 800						10		19	Э	L	2022			
		State	Zip Code				FEC I	dent	ification	ı Nur	nber				
	Seattle Purpose of Disbursement	WA	98134					-		_		-			
	Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	ard Purchas	e)				С	rans	action	ID : \$	SB21B	.44707			
	Candidate Name				ego ype	ry/	Amou	nt of	Each	Disbu	ırseme	ent this Pe	∍riod		
	Office Sought: House Disbursel	ment For: Primary	General					_	7	_	7	10.59			
	President	Other (spe					v								
	State: District:	(500	<i>3</i> , 4				X	iemo	Item						
S	SUBTOTAL of Disbursements This Page (optional)							-		_	-	0.00			
F							芦	÷	7	÷		- 4	艹		
Ιт	OTAL This Period (last page this line number only	·)					- 1		_		_				

SCHEDULE B (FEC Form 3X)	llac	oroto oslas dula (a)	FOR LINE NUMBER: PAGE 108									
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the	(check only		∃ 00] oc						
		Summary Page	X 21b 28a	22 28b	23 28c	26 27 29 30b						
Any information conicd from such Departs and Ct-	tomonto marr	not be sold as use										
Any information copied from such Reports and State or for commercial purposes, other than using the r												
NAME OF COMMITTEE (In Full)												
WOMEN SPEAK OUT PAC												
Full Name (Last, First, Middle Initial)												
A. Subway				Date of Di	sbursemer							
Mailing Address 325 Sub Way				10	09	2022						
City	State	Zip Code		===								
Milford	CT	06461		FEC Ident	ification Nu	umber						
Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit	Cord Durahaa	0)		C								
	Caru Furcilas	е)				: SB21B.44708						
Candidate Name			Category/	Amount of	Each Disl	bursement this Period						
Office Sought: House Disbur	sement For:		Туре			73.36						
Senate	Primary	General		7 7 7								
President	Other (spe	ecify) 🔻		✗ Memo	Item							
State: District:				, mone								
Full Name (Last, First, Middle Initial)												
B. Subway				Date of Di	sbursemer							
Mailing Address 325 Sub Way				10	14	2022						
Walling Address 325 Sub Way				10 11 2022								
City	State Zip Code											
Milford	СТ	06461		FEC Ident	incation ive	inibol						
Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit	Card Purchas	e)		C								
Candidate Name		,				SB21B.44709						
			Category/ Type	Amount of	Each Disi	bursement this Period						
Office Sought: House Disbur	sement For:	I				85.28						
Senate	Primary	General			,	,						
President	Other (spe	cify)		X Memo	Item							
State: District:												
Full Name (Last, First, Middle Initial)				Date of Di	ishursemer	nt						
C. Subway				M M M	D D	/ Y Y Y Y						
Mailing Address 325 Sub Way				10	15	2022						
0"		7. 0. 1										
City Milford	State CT	Zip Code 06461		FEC Ident	ification Nu	umber						
Purpose of Disbursement				С								
Food/Beverage (9/16/22 Usio Inc. Prepaid Debit	Card Purchas	e)			action ID :	: SB21B.4471(
Candidate Name			Category/			bursement this Period						
Office Cought:			Type			20.00						
Office Sought: House Disbur	sement For: Primary	General				20.00						
President	Other (spe			V								
State: District:		<i>3</i> / ₹		X Memo	item							
<u> </u>												
SUBTOTAL of Disbursements This Page (optional	l)		·····•		7	0.00						
TOTAL This Period (last page this line number or	າly)											

SCHEDULE B (FEC	Form 3X)			FOR	FOR LINE NUMBER: PAGE 109 OF 18					182				
ITEMIZED DISBURS	EMENTS		parate schedule(s) category of the	I ` —	(check only one)									
			Summary Page	×	21b 28a	22 28b	23		26 29	27 30b				
American accident from a	ich Denember and Otate													
Any information copied from su or for commercial purposes, ot														
NAME OF COMMITTEE (In	Full)													
WOMEN SPEAK C	OUT PAC													
Full Name (Last, First, Midd	lle Initial)					Data a	f Dialassa							
A. Subway						Date o	f Disbur	sem		YYYY				
Mailing Address 325 Sub W	ay					10	ا لا	15		2022				
City		State	Zip Code			FEC Id	lentificat	ion I	Number					
Milford		СТ	06461				-	_		-				
Purpose of Disbursement Food/Beverage (9/16/22 Us	io Inc. Prepaid Debit C	ard Purchas	se)	· · ·		С		_						
Candidate Name	·				-	Transaction ID : SB21B.44711 Amount of Each Disbursement this Per								
				Catego Type		Amoun	t of Eac	וט ח:	isbursem	ent this Pe)riod			
Office Sought: Hou	se Disburse	ement For:	I			Ι.	1 20			14.51				
Sen		Primary	General				,		,					
State: District:	sident	Other (spe	ecify) 🔻			X M∈	emo Iten	n						
Full Name (Last, First, Midd	lle Initial)													
B. Sumo Hibachi & W	· · · · · · · · · · · · · · · · · · ·					Date o	f Disbur	sem	ent					
Odino i libacili a vv	ii ig					M M / D D / Y Y Y Y								
Mailing Address 11720 Med	dlock Bridge Rd			10 17 2022										
City		State	Zip Code	FEC Id	lentificat	ion I	Number							
Duluth Purpose of Disbursement		GA	30097											
Food/Beverage (9/16/22 Us	io Inc. Prepaid Debit C	Card Purchas	se)	Г.		C								
Candidate Name				Catego	rv/				: SB21E	3.44713 ent this Pe	eriod			
				Type		7 11110 011	01 200		iobai com		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
Office Sought: Hou		ement For:						_		50.00				
Sen		Primary	General											
State: District:	ident	Other (spe	ecity)			X M∈	emo Iten	n						
Full Name (Last, First, Midd	lle Initial)													
c. Taco Bell	,					Date o	f Disbur	sem						
Mailing Address 1 Glen Bell	Way					10	/ D	11	/ Y	2022				
City		State	Zip Code			FFQ !	lontiti ·		\					
Irvine		CA	92618			PEC 10	lentificat	IOII	vuiiiber					
Purpose of Disbursement Food/Beverage (9/16/22 Us	io Inc. Prepaid Debit C	ard Purchas	se)	· · ·		C			0004					
Candidate Name				Catego					D : SB21E isbursem	a.44/14 ent this Pe	eriod			
Office Sought: Hou	se Diehurea	ement For:		Туре						39.25				
Sen		Primary	General				7	—			_			
Pres	sident	Other (spe				X Me	emo Iten	_						
State: District:						IVIE	-ino iter							
SUBTOTAL of Disbursements	This Page (optional)							=		0.00				
	(-				_	_	-	=			#			
TOTAL This Period (last page	this line number only	v)												

SC	CHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 110 OF 18								
	EMIZED DISBURSEMENTS		arate schedule(s)	(check or	I NOMBER.							
			category of the Summary Page	` 🗶 21k	· ·							
		Dotalied		288	28b 28c 29 30b							
	y information copied from such Reports and State for commercial purposes, other than using the nar											
	NAME OF COMMITTEE (In Full)											
\rangle	WOMEN SPEAK OUT PAC											
_	Full Name (Last, First, Middle Initial)				Data of Dishamourant							
Α.	Taco Bell				Date of Disbursement							
	Mailing Address 1 Glen Bell Way				10 18 2022							
	City	State	Zip Code		FEC Identification Number							
	Irvine	CA	92618									
	Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	ard Purchase	e)		C							
	Candidate Name	ara r aronao			Transaction ID : SB21B.44715							
	Candidate Name			Category/ Type	Amount of Each Disbursement this Period							
	Office Sought: House Disburse	ment For:		1900	86.40							
	Senate	Primary	General		7 7 7							
	President	Other (spe	cify) ▼		★ Memo Item							
	State: District:											
_	Full Name (Last, First, Middle Initial)				B . (B)							
Ь.	Target				Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y							
	Mailing Address 1000 Nicollet Mall											
	City	State	Zip Code		FEC Identification Number							
	Minneapolis	MN	55403		C							
	Purpose of Disbursement Gift Card Prizes (9/16/22 Usio Inc. Prepaid Debit C	ard Purchas	se)									
	Candidate Name			لبسيا	Transaction ID : SB21B.44716							
				Category/ Type	Amount of Each Disbursement this Period							
	Office Sought: House Disburse	ment For:			30.00							
	Senate	Primary	General									
	President	Other (spe	cify)		X Memo Item							
_	State: District:											
_	Full Name (Last, First, Middle Initial)				Date of Disbursement							
C.	Target											
	Mailing Address 1000 Nicollet Mall				10 13 2022							
	City	State	Zip Code		FEC Identification Number							
	Minneapolis Purpose of Disbursement	MN	55403									
	Furpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	ard Purchase	e)	T	C							
	Candidate Name			Category/ Type	Transaction ID: SB21B.44717 Amount of Each Disbursement this Period							
	Office Sought: House Disburse	ment For:		.7.5	26.50							
	Senate	Primary	General		7							
	President	Other (spe	cify) ▼		X Memo Item							
_	State: District:											
s	UBTOTAL of Disbursements This Page (optional)				0.00							
É					7 7 7							
т	OTAL This Period (last page this line number only)										

S	CHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 111 OF 18						F 182				
IT	EMIZED DISBURSEMENTS		category of the	(crical arily aria)										
			Summary Page		21b 28a	22 28b	23	L	26 29		27 30b			
Γ.	Chairmantian assisted from such Departs and Otata													
	ny information copied from such Reports and State for commercial purposes, other than using the nar													
\setminus	NAME OF COMMITTEE (In Full)													
	WOMEN SPEAK OUT PAC													
$\overline{}$	Full Name (Last, First, Middle Initial)													
A.	Target					Date of Disbursement								
	Mailing Address 1000 Nicollet Mall					10		19			2022			
	,	State	Zip Code			FEC Id	lentificat	ion	Numbe	er				
	Minneapolis	MN	55403											
	Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	ard Purchas	se)			C		_						
	Candidate Name		,		-	1	ansaction		_			tat		
		Cate								emer	nt this Pe	eriod		
	Office Sought: House Disburse		11.					19.07	'. I					
	Senate	Primary	General				,		,					
	State: President State:	Other (spe	ecify) \blacktriangledown	✗ Me	emo Iter	n								
_	Full Name (Last, First, Middle Initial)													
В.	Texaco					Date of Disbursement								
	Mailing Address 2400 San Ramon Valley Blvd			10 06 2022										
	City	State	EEO IA			Niverala								
	San Ramon	CA	94583			FEC 10	lentificat	.1011	Numbe	ei ei				
	Purpose of Disbursement Gift Card Prizes (9/16/22 Usio Inc. Prepaid Debit C	ard Purcha	se)											
	Candidate Name						ansactio							
	Candidato Namo			Categ Typ		Amoun	t of Ead	:h [)isburs	emer	nt this Pe	eriod		
	Office Sought: House Disburse	ment For:		1,712		1 .					150.00			
	Senate	Primary	General					_						
	President State: District:	Other (spe	ecify)			X Me	emo Iter	n						
_	Full Name (Last, First, Middle Initial)					_		_		—				
C.	Texaco						f Disbur							
	Mailing Address 2400 San Ramon Valley Blvd					10		11			2022			
	City	State	Zip Code			EEC 14	lentificat	tion	Numb	or				
	San Ramon	CA	94583			_ FEC 10	ı c ı ılııCdl	IUI	INUITIDE	ات ا	-			
	Purpose of Disbursement Travel (9/16/22 Usio Inc. Prepaid Debit Card Purch	nase)				C	aneacti	on I	D · SB	21 B	44721			
	Candidate Name			Categ		Transaction ID : SB21B.44721 Amount of Each Disbursement this Perio						eriod		
	Office Sought: House Disburse	ment For:		.,,,	-					_	12.18	3		
	Senate	Primary	General				-							
	President	Other (spe	ecify) 🔻			X Me	emo Iter	n						
_	State: District:					<u> </u>								
8	SUBTOTAL of Disbursements This Page (optional)				▶		1.70	_			0.00	0		
\vdash							,	Ŧ			-	-		
Ιт	OTAL This Period (last page this line number only	·)												

SCHEDULE B (FEC Form 3X)	Use sepa	arate schedule(s)	FOR LINE I		F	PAGE 112 OF	182
TEMIZED DISBURSEMENTS	for each	category of the Summary Page	21b	22	23 26		
			28a	28b	28c 29		
Any information copied from such Reports and State or for commercial purposes, other than using the na							
NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC							
Full Name (Last, First, Middle Initial) A. Texaco				Date of Di	sbursement		
Mailing Address 2400 San Ramon Valley Blvd				10	11	2022	
City San Ramon Purpose of Disbursement	State CA	Zip Code 94583			fication Numb	per	
Travel (9/16/22 Usio Inc. Prepaid Debit Card Purch Candidate Name	nase)		Category/		action ID : SB	321B.44722 sement this Per	riod
Office Sought: House Disburse Senate	ment For: Primary	General	Type	Amount of	Zaon Biobaro	20.18	
State: President District:	Other (spec	cify) ▼		X Memo	Item		
Full Name (Last, First, Middle Initial) 3. Texaco				M - M /	sbursement	Y	1
Mailing Address 2400 San Ramon Valley Blvd City	State	Zip Code		10	12	2022	1
San Ramon Purpose of Disbursement	CA	94583		FEC Identi	fication Numb	per	
Travel (9/16/22 Usio Inc. Prepaid Debit Card Purcl Candidate Name	iase)		Category/ Type		action ID : SB Each Disburs	321B.44723 sement this Per	riod
Office Sought: House Disburse Senate President	ment For: Primary Other (spec	General cify)		V		25.78	
State: District:				X Memo	Item		
Full Name (Last, First, Middle Initial) - Texaco				Date of Di	sbursement	Y . Y . Y . Y	,
Mailing Address 2400 San Ramon Valley Blvd				10	14	2022	
City San Ramon Purpose of Disbursement Travel (9/16/22 Usio Inc. Prepaid Debit Card Purch	State CA	Zip Code 94583		FEC Identi	fication Numb	oer	
Candidate Name			Category/ Type		action ID : SE Each Disburs	321B.44724 sement this Per	riod
Office Sought: House Senate President State: District:	ment For: Primary Other (spec	General cify) ▼	71	X Memo	Item	36.61	
SUBTOTAL of Disbursements This Page (optional).					g- 1 1 2	0.00	
TOTAL This Period (last page this line number only	·)						Ī

SCHEDULE B (FEC Form 3X) FOR LINE NUMBER: PAGE 113 OF							F 182			
TEMIZED DISBURSEMENTS		rate schedule(s) category of the	(chec	k only	one)					
		Summary Page	×	21b 28a	22 28b	23	L	26 29	27 30b	
Any information copied from such Reports and Statem	ente may n	ot he sold or use	d by any							ione
or for commercial purposes, other than using the name										
NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC										
/										
Full Name (Last, First, Middle Initial)					Date of	Diebu	ırcam	nont		
Thompson, Luke, , ,					M M	_	D D		YYY	V
Mailing Address 2800 Shirlington Road, Suite 1200					10	J L	13	J L	2022	
,	state	Zip Code			FEC Ide	entifica	ation	Number		
Arlington Purpose of Disbursement	VA	22206				_	_			
Travel / Mileage					C		-			
Candidate Name			Categor	v/				_	B.44129 nent this P	eriod
			Type	,	-					-
Office Sought: House Disbursem									91.50	5
	Primary Other (spec	General								
State: District:	Other (Spec	iiy) ▼			Me	mo Ite	m			
Full Name (Last, First, Middle Initial)										
3. Trace Strategies, LLC					Date of	Disbu	ırsen	nent		
Mailian Addunas					M = M	/	D D	/ Y	2022	Υ
Mailing Address 11104 Westpoint Court	***	Zin Code			10		01		2022	
,	state AR	Zip Code 72211			FEC Ide	entifica	ation	Number		
Purpose of Disbursement				\neg	С					
State Director Pay						nsacti	on II	D : SB21	B.44167	
Candidate Name			Categor	y/	Amount	of Ea	ich D	isbursen	nent this P	eriod
Office Sought: House Disbursem	ent For:		Туре						12000.0	0
	Primary	General					_		- 40	_
President	Other (spec	ify)			Me	mo Ite	m			
State: District:					Ц					
Full Name (Last, First, Middle Initial)					Date of	Dichu	ırcom	oont		
C. Tropical Smoothie Cafe					M M		D D		YYY	V
Mailing Address 1117 Perimeter Center					10	ľĽ	09		2022	
,	state	Zip Code			FEC Ide	entifica	ation	Number		
Atlanta Purpose of Disbursement	GA	30338					-			
Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Car	rd Purchase)								
Candidate Name			Categor Type	ry/					B.44726 nent this P	eriod
Office Sought: House Disbursem	ent For:							1 45	15.5	0
	Primary	General								
State: District:	Other (spec	шу) ▼			X Me	mo Ite	m			
Side. District.					_	_	_	-		_
SUBTOTAL of Disbursements This Page (optional)				<u> </u>	Ŀ		_		12091.5	6
TOTAL This Period (last page this line number only).				•						

2/	CHEDULE B (FEC Form 3X)												
	·	llse sena	rate schedule(s)	chedule(s) FOR LINE NUMBER: PAGE 114									
T	EMIZED DISBURSEMENTS		category of the	(check only	y one) 								
		Detailed S	Summary Page	28a	28b 28c 29 30b								
Δr	ny information copied from such Reports and Stater	mente may n	ot he sold or use	ad by any nere	on for the purpose of soliciting contributions								
	for commercial purposes, other than using the nan												
\rangle	NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC												
_	Full Name (Last, First, Middle Initial)												
۹.					Date of Disbursement								
	Mailing Address 1117 Perimeter Center				10 18 2022								
	,	State	Zip Code		FEC Identification Number								
	Atlanta Purpose of Disbursement	GA	30338										
	Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	ard Purchase)		C								
	Candidate Name			Category/	Transaction ID: SB21B.44727 Amount of Each Disbursement this Period								
				Type	Attribute of Each Biobardonicite this Ferica								
	Office Sought: House Disburser	ment For:			20.65								
	Senate	Primary	General										
	State: District:	Other (spec	iiy) ▼		✗ Memo Item								
	Full Name (Last, First, Middle Initial)												
3.	Uber Eats				Date of Disbursement								
					M M / D D / Y Y Y Y								
	Mailing Address 1455 Market Street				10 06 2022								
	,	State	Zip Code		FEC Identification Number								
	San Francisco Purpose of Disbursement	CA	94103										
	Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	ard Purchase)		C								
	Candidate Name			Category/	Transaction ID : SB21B.44729 Amount of Each Disbursement this Period								
				Type									
	Office Sought: House Disburser				15.29								
	Senate	Primary	General										
	President State: District:	Other (spec	шу)		Memo Item								
	Full Name (Last, First, Middle Initial)												
С.	· · · · · · · · · · · · · · · · · · ·				Date of Disbursement								
					M M / D D / Y Y Y Y								
	Mailing Address 1455 Market Street				10 08 2022								
	City	State	Zip Code		FEC Identification Number								
	San Francisco	CA	94103										
	Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	ard Purchase)		C Transaction ID - CROAD 44724								
	Candidate Name			Category/	Transaction ID : SB21B.4473(Amount of Each Disbursement this Period								
	Office Sought: House Disburser	ment For:		Туре	77.35								
	Senate	Primary	General		7 7 7								
	President	Other (spec	ify) ▼		X Memo Item								
	State: District:				L								
S	SUBTOTAL of Disbursements This Page (optional)			······	0.00								
_	OTAL This David (lost no see this live second	.											
- [OTAL This Period (last page this line number only))											

S П

SCHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 115 OF					182					
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the	(check	,	′					¬ .=			
		Summary Page	X	21b 28a	22 28b		23 28c	2 		27 30b			
Any information copied from such Reports and State	manta may	not be cold or us	ad by any										
or for commercial purposes, other than using the nati													
NAME OF COMMITTEE (In Full)													
WOMEN SPEAK OUT PAC													
Full Name (Last, First, Middle Initial)													
A. Uber Eats					Date o	f Dist	ourser	nent					
Mailing Address 1455 Market Street					10	/	10			2022			
City	State	Zip Code			FEC Id	lentific	cation	Num	ber				
San Francisco Purpose of Disbursement	CA	94103			_					-			
Food/Beverage (9/16/22 Usio Inc. Prepaid Debit C	ard Purchase	e)			C								
Candidate Name			Categor	w/					B21B.	44731 nt this Pe	eriod		
			Type	,	7 tillodii	. 0. 2	-4011	Jiobai					
	ment For:								,	102.97			
Senate President	Primary Other (spec	General											
State: District:	Other (open	Olly) 🔻			X Me	emo It	tem						
Full Name (Last, First, Middle Initial)													
B. Uber Eats					Date o	f Dist	ourser	ment					
Mailing Address 1455 Market Street				10 13 2022									
Mailing Address 1455 Market Street				.0 10 2022									
City	State		FEC Id	lentific	cation	Num	ber						
San Francisco Purpose of Disbursement	CA	94103											
Food/Beverage (9/16/22 Usio Inc. Prepaid Debit C	ard Purchase	e)	Г.		C					11700			
Candidate Name			Categor	v/				_	B21B. 4 rsemei	44/32 nt this Pe	eriod		
			Type		_		-	-		4.04	7		
Office Sought: House Disburse Senate	ment For: Primary	General							,	4.21			
President	Other (spec				٠								
State: District:	``				X Me	emo It	tem						
Full Name (Last, First, Middle Initial)													
C. Uber Eats					Date o	f Disk	ourser	nent					
Mailing Address 1455 Market Street					10	/	15	_		y			
	State CA	Zip Code 94103			FEC Id	lentific	cation	Num	ber				
San Francisco Purpose of Disbursement	- CA	94103		_	С								
Food/Beverage (9/16/22 Usio Inc. Prepaid Debit C	ard Purchase	e)		ш		ansac	ction	ID · S	B21B.	44733			
Candidate Name			Categor	y/				_		nt this Pe	eriod		
Office Sought: House Disburse	ment For:		Туре		Г.				-	30.00			
Senate Dispulse	Primary	General							,	33.00			
President	Other (spec				X Me	emo It	tem						
State: District:					IVIC	,,,,,	tom						
SUBTOTAL of Disbursements This Page (optional).				•						0.00)		
100 (1,1,100)				_	$\overline{}$				7		=		
TOTAL This Period (last page this line number only	·)			•					,				

17

SCHEDULE B (FEC Form 3X)	ller	anata aab - dud-7 N	FOR LINE	NUMBER:		PAGE 116 OF 182					
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the	(check on		□ 00						
		Summary Page	X 21b 28a		23 28c	26 27 29 30b					
Any information copied from such Benerte and States	nonte mau	not be seld or us									
Any information copied from such Reports and Staten or for commercial purposes, other than using the nam											
NAME OF COMMITTEE (In Full)											
WOMEN SPEAK OUT PAC											
Full Name (Last, First, Middle Initial)					D						
A. Uber Eats				Date of	Disburseme						
Mailing Address 1455 Market Street				10	19	2022					
City	State	Zip Code		EEC Ido	atification N	lumbor					
San Francisco	CA	94103		FEC Identification Number							
Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	rd Purchase	e)									
Candidate Name						: SB21B.44734					
Canadate Name			Category/ Type	Amount	of Each Di	sbursement this Period					
Office Sought: House Disburser	nent For:		.,,,,	1 ' '		13.67					
Senate	Primary	General				7- 7-					
President	Other (spec	cify) ▼		★ Men	no Item						
State: District:											
Full Name (Last, First, Middle Initial)				Doto of	Disburseme	ont.					
B. Usio, Inc.											
Mailing Address 3611 Paesanos Pkwy, Suite 300				10	/ D D	2022					
•	State	Zip Code		FEC Ide	ntification N	lumber					
San Antonio Purpose of Disbursement	TX	78213									
Pre-Paid Debit Card - Memo items will be provided	as expense	s occur		C							
Candidate Name			Category/	1	: SB21B.44484 sbursement this Period						
			Type	Amount							
Office Sought: House Disbursen] L	7	8000.00					
Senate	Primary	General									
President State: District:	Other (spec	сіту)		Men	no Item						
Full Name (Last, First, Middle Initial)											
C. Wal-mart				Date of	Disburseme	ent					
				M M	/ D D	/ Y Y Y Y Y					
Mailing Address 608 SW 8th Street				10	13	2022					
City	State	Zip Code		EEC Ido	ntification N	lumber					
Bentonville	AR	72712		1	nincation i	VOLITIO ET					
Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca	rd Purchase	e)		C							
Candidate Name			لسبا			: SB21B.44735					
Sandidato Harrio			Category/ Type	Amount	ot Each Di	sbursement this Period					
Office Sought: House Disburser	nent For:		.,,,,	9.72							
Senate	Primary	General		7							
President	Other (spec	cify) ▼		X Men	no Item						
State: District:											
OUDTOTAL of Bishamora, it Till B						8000.00					
SUBTOTAL of Disbursements This Page (optional)			·····•			2300.00					
TOTAL This Period (last page this line number only)											

Use separate schedule(s) Check only one) Call Cal	S	CHEDULE B (FEC Form 3X)			FOF	FOR LINE NUMBER: PAGE 117 OF 18					F 182				
Detailed Summary Page Page 28a 28b 28c 28 28c	IT	EMIZED DISBURSEMENTS			_ I ` _										
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions of for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) WOMEN SPEAK OUT PAC Full Name (Last, First, Middle Initial) A. Wendy's Mailing Address 1 Dave Thomas Blvd City Dublin Purpose of Disbursement Food/Beverage (9/16/22 Uslo Inc. Prepaid Debit Card Purchase) Candidate Name City City City City City City City Althons State District Full Name (Last, First, Middle Initial) B. Zaxby's Mailing Address 1040 Founders Blvd City Althons Cardidate Name City City Althons Cardidate Name City Althons Senate Primary General Primary General Primary General FEC Identification Number Cardidate Name Category/ Type City Althons Senate Primary General City Althons Category/ Type City Althons Senate Primary General Category/ Type City Althons Category/ Type City Alt									L						
or for commercial purposes, other than using the name and aodress of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) WOMEN SPEAK OUT PAC Full Name (Last, First, Middle Initial) City State Oth Oth A 3017 Purpose of Disbursement ProutGeverage (M1622 Usio Inc. Prepaid Debit Card Purchase) President State: Disbursement For State: Disbursement For State: Disbursement For State: Disbursement Full Name (Last, First, Middle Initial) B. ZaxDy'S Mailing Address 1040 Founders Blvd City State: Disbursement For State: Disbursement To State: Disbursement Disbursement To State: Transaction ID: State: Disbursement To State: Transaction ID: State: Disbursement To State: Transaction ID: State: To Sta	Γ _Λ	Chata													
WOMEN SPEAK OUT PAC Full Name (Last, First, Middle Initial) A. Wendys Mailing Address 1 Dave Thomas Blvd City															
Full Name (Last, First, Middle Initial) A. Wendys Mailing Address 1 Dave Thomas Bivd City Dublin FoodPewerage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Office Sought: Full Name (Last, First, Middle Initial) B. Zaxby's Mailing Address 1040 Founders Bivd City Office Sough: Furpose of Disbursement FoodPewerage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) City Athens Candidate Name City Athens Candidate Name City Office Sough: Furpose of Disbursement FoodPewerage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name City Office Sough: Furpose of Disbursement FoodPewerage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Office Sough: Fill Name (Last, First, Middle Initial) Furpose of Disbursement FoodPewerage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Office Sough: Furpose of Disbursement FoodPewerage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) City Athens Furpose of Disbursement FoodPewerage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) City Athens Furpose of Disbursement FoodPewerage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) City Athens Furpose of Disbursement FoodPewerage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) City Athens Furpose of Disbursement FoodPewerage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) City Athens Furpose of Disbursement FoodPewerage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Office Sought: First, Middle Initial) Furpose of Disbursement FoodPewerage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Transaction ID: SB21B.44738 Amount of Each Disbursement Ins Period First Middle Initial Memo Item Substitution Number City Transaction ID: SB21B.44738 Amount of Each Disbursement Ins Period Memo Item Memo Item Memo Item Furpose of Disbursement Ins Period Memo Item Memo Item Memo Item Memo Item Furpose of Disbursement Ins Period Memo Item Memo Item Furpose of Disbursement Ins Period Memo Item Memo Item Memo Item Memo Item Memo Item	\setminus	NAME OF COMMITTEE (In Full)													
A. Wendys Mailing Address 1 Dave Thomas Blvd City Dubin Purpose of Disbursement FoodBeverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name City Senate President State: Disbirt: Full Name (Last, First, Middle Initial) Full Name (Last, First, Middle Initial) Caddidate Name Cradidate Name Category/ Athens Category/ Category/ Category/ Athens Category/ Category/ Category/ Athens Category/ Category/ Category/ Category/ Category/ Athens Category/ Mailing Address 1040 Founders Blvd City Category/ Cate		WOMEN SPEAK OUT PAC													
Mailing Address 1 Dave Thomas Blvd City Dublin Purpose of Disbursement Foodfeverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) City Office Sought: Full Name (Last, First, Middle Initial) B. Zaxby's Mailing Address 1040 Founders Blvd City Office Sought: Full Name (Last, First, Middle Initial) B. Zaxby's Mailing Address 1040 Founders Blvd City Sanate President State: Disbursement For: Senate Primary General Primary General Primary General Primary General State: District: Full Name (Last, First, Middle Initial) B. Zaxby's Mailing Address 1040 Founders Blvd City Athens Senate President State: District: Full Name (Last, First, Middle Initial) Category' Type Category' Annount of Each Disbursement this Period Transaction ID : \$8218.44738 Annount of Each Disbursement this Period Transaction ID : \$8218.44738 Annount of Each Disbursement Foodfeverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) City Athens State: District: Full Name (Last, First, Middle Initial) C. Zaxby's Mailing Address 1040 Founders Blvd City Athens Category After Senate Primary General Provideverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category Category Transaction ID : \$8218.44738 Annount of Each Disbursement Correspondent FEC Identification Number Category Transaction ID : \$8218.44738 Annount of Each Disbursement bits Period Transaction ID : \$8218.44738 Annount of Each Disbursement bits Period Correspondent Transaction ID : \$8218.44738 Annount of Each Disbursement bits Period Correspondent Transaction ID : \$8218.44738 Annount of Each Disbursement bits Period Correspondent Correspondent Transaction ID : \$8218.44738 Annount of Each Disbursement bits Period Correspondent Transaction ID : \$8218.44738 Annount of Each Disbursement bits Period Correspondent Transaction ID : \$8218.44738 Annount of Each Disbursement bits Period Correspondent Transaction ID : \$8218.44738 Annount of Each Disbursement bits Period Transaction ID : \$8218.44738 Annount of Each Disbursement bits Period Transacti	_						5.								
Mailing Address 1 Dave Thomas Blvd City Dubblin Pripose of Disbursement ProudBeverage (916 222 Usio Inc. Prepaid Debit Card Purchase) Office Sought: Full Name (Last, First, Middle Initial) B. Zaxby's Category: Transaction ID : \$8218.44737 Amount of Each Disbursement Fill Name (Last, First, Middle Initial) Office Sought: Full Name (Last, First, Middle Initial) Furch Senate President Office Sought: Full Name (Last, First, Middle Initial) Full Name (Last, First, Middle Initial) Category: Transaction ID : \$8218.44737 Amount of Each Disbursement Transaction ID : \$8218.44737 Amount of Each Disbursement ID : Transaction ID : \$8218.44737 Amount of Each Disbursement ID : Transaction ID : \$8218.44737 Amount of Each Disbursement ID : Transaction ID : \$8218.44737 Amount of Each Disbursement ID : Transaction ID : \$8218.44737 Amount of Each Disbursement ID : Transaction ID : \$8218.44737 Amount of Each Disbursement ID : Transaction ID : \$8218.44737 Amount of Each Disbursement ID : Transaction ID : \$8218.44737 Amount of Each Disbursement ID : Transaction ID : \$8218.44737 Amount of Each Disbursement ID : Transaction ID : \$8218.44737 Amount of Each Disbursement ID : Transaction ID : \$8218.44737 Amount of Each Disbursement ID : Transaction ID : \$8218.44738 Amount of Ea	Α.	Wendys					Date o	of Disb			V	V V V			
Dublin OH 43017 Purpose of Disbursement Food/Beverage (8/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Office Sought: House Primary General President State: Disbursement For: Senate President Other (specify) ▼ Malling Address 1040 Founders Blvd City Sandseverage (8/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Date of Disbursement FEC Identification Number Category/ Type Tec Identification Number Category/ Type FEC Identification Number Category/ Type Transaction ID : SB218.44738 Amount of Each Disbursement this Period Each Disbursement Type Category/ Type Transaction ID : SB218.44738 Transaction ID : S		Mailing Address 1 Dave Thomas Blvd					10								
Purpose of Disbursement FoodBeverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Cardidate Name Category/ Type Office Sought: House Senate Primary General Disbursement For: State: District: Full Name (Last, First, Middle Initial) B. Zaxby'S Mailing Address 1040 Founders Blvd City Athens Candidate Name Category/ Type Disbursement FoodBeverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Category/ Type Office Sought: House Disbursement FoodBeverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Caxby'S Mailing Address 1040 Founders Blvd City Athens Senate Primary General Disbursement FoodBeverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Office Sought: House Disbursement For: Senate Primary General Disbursement Full Name (Last, First, Middle Initial) C. Zaxby'S Mailing Address 1040 Founders Blvd City Athens Ga 30606 Purpose of Disbursement FoodBeverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Transaction ID: SB218.44738 Amount of Each Disbursement FoodBeverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Office Sought: House Disbursement FoodBeverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Transaction ID: SB218.44738 Amount of Each Disbursement FoodBeverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Office Sought: House Disbursement FoodBeverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Office Sought: House Disbursement FoodBeverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Transaction ID: SB218.44738 Amount of Each Disbursement Transaction ID: SB218.44738 Transaction ID: SB218.4		,		· '			FEC Id	dentific	ation	Numbe	er				
Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Office Sought: House Disbursement For: Full Name (Last, First, Middle Initial) B. Zaxby's Malling Address 1040 Founders Blvd City Athens Candidate Name Office Sought: House Disbursement For: Senate President Senate Prepaid Debit Card Purchase) Category/ Type Transaction ID : \$8218.44737 Amount of Each Disbursement this Period X Memo Item FEC Identification Number FEC Identification Number Category/ Type Office Sought: House Disbursement For: Senate President Other (specify) Full Name (Last, First, Middle Initial) C. Zaxby's Memo Item FEC Identification Number Category/ Type Transaction ID : \$8218.44738 Amount of Each Disbursement Inis Period Transaction ID : \$8218.44737 Amount of Each Disbursement ### A 0.00 ### A 0.00 ### Address 1040 Founders Blvd Category/ Type Office Sought: House Disbursement For: Sanate President Other (specify) Category/ Type Date of Disbursement ### A 0.00 ###			ОН	43017				-	—		_	-			
Cardidate Name Office Sought: House Senate Primary General Primary General Primary General Processory Category/ Type Amount of Each Disbursement this Period President State: District: Date of Disbursement			ard Purchas	e)		П	C				_				
Office Sought: House Senate President For: Senate President State: District: Full Name (Last, First, Middle Initial) B. Zaxby's Mailing Address 1040 Founders Blvd City Athens Furpose of Disbursement For: Senate President District: Full Name (Last, First, Middle Initial) City Athens GA 30606 Purpose of Disbursement For: Senate President District: Full Name (Last, First, Middle Initial) Category/ Type Office Sought: House Disbursement For: Senate President GA 30606 City Athens Category/ Type Category/ Type Disbursement For: Senate President District: Full Name (Last, First, Middle Initial) City Athens Category/ Type Category/ Type Date of Disbursement Disbursement For: Senate President GA 30606 City Athens Category/ Type Date of Disbursement Type Category/ Type Category/ Type Date of Disbursement Type Category/ Type Category/ Type Date of Disbursement Type Category/ Type Category/ Type Date of Disbursement Disbursement Type Category/ Type Category/ Type Date of Disbursement Disbursement Type Category/ Type Category/ Type Date of Disbursement Disbursement Type Category/ Type Date of Disbursement Disbursement Type Category/ Type Date of Disbursement Disbursement Disbursement Type Category/ Type Date of Disbursement Disburseme		Candidate Name			0-1										
State: District: Full Name (Last, First, Middle Initial) B. Zaxby's Mailing Address 1040 Founders Blvd City Athens Candidate Name Office Sought: District: Full Name (Last, First, Middle Initial) Date of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Other (specify) Transaction ID: SB21B.44738 Amount of Each Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) City Athens State: District: Full Name (Last, First, Middle Initial) C: Zaxby's Mailing Address 1040 Founders Blvd City Athens Furpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) City Athens Category/ Type Date of Disbursement Fill Name (Last, First, Middle Initial) C: Zaxby's Mailing Address 1040 Founders Blvd City Athens Category/ Type Category/ Type Date of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Transaction ID: SB21B.44738 Amount of Each Disbursement C Transaction ID: SB21B.44738 Amount of Each Disbursement this Period City Athens Category/ Type Category/ Type Category/ Type Office Sought: House Disbursement For: Senate President President Cother (specify) Transaction ID: SB21B.44738 Amount of Each Disbursement this Period Cother (specify) Transaction ID: SB21B.44738 Amount of Each Disbursement this Period Cother (specify) Transaction ID: SB21B.44738 Amount of Each Disbursement this Period Cother (specify) Transaction ID: SB21B.44738 Amount of Each Disbursement this Period							Amour	IL OI E	acn L	JISDUIS	emer	nt this Pe	erioa		
State: District:		Office Sought: House Disburse		1 L.					40.00						
State: District: Full Name (Last, First, Middle Initial) B. Zaxby's Mailing Address 1040 Founders Blvd City										,					
B. Zaxby's Mailing Address 1040 Founders Blvd City Athens Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name City Athens District: Full Name (Last, First, Middle Initial) C. Zaxby's Mailing Address 1040 Founders Blvd City Athens Full Name (Last, First, Middle Initial) C. Zaxby's Mailing Address 1040 Founders Blvd City Athens Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type District: Full Name (Last, First, Middle Initial) C. Zaxby's Mailing Address 1040 Founders Blvd City Athens Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Office Sought: House GA 30606 Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Office Sought: House Disbursement For: Category/ Type Category/ Type Category/ Type Memo Item FEC Identification Number FEC Identification Number Category/ Type Category/ Type Category/ Type Office Sought: House President Primary General Other (specify) Memo Item Substract Memo Item Substract Memo Item Substract Memo Item			Other (spe	ecity) 🔻			X Me	emo Ito	em						
B. Zaxby's Mailing Address 1040 Founders Blvd City Athens GA 30606 Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Office Sought: House Disbursement For: Senate Primary General President State: District: Full Name (Last, First, Middle Initial) C. Zaxby's Mailing Address 1040 Founders Blvd City Athens Purpose of Disbursement For: GA 30606 Purpose of Disbursement For: State GA 30606 City Athens Purpose of Disbursement For: GA 30606 Purpose of Disbursement For: Gandidate Name Office Sought: House Disbursement For: Gandidate Name Other (specify) ✓ Memo Item SubstortAL of Disbursements This Page (optional)	_														
Mailing Address 1040 Founders Blvd	В.	,													
Athens Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President State: District: Full Name (Last, First, Middle Initial) C. Zaxby's Mailing Address 1040 Founders Blvd City Athens Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Date of Disbursement Fix Memo Item Subtrotal of Disbursement For: Senate Primary General Other (specify) Fix Memo Item Fix Memo Item Fix Memo Item Fix Memo Item		Mailing Address 1040 Founders Blvd													
Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Office Sought: House Senate Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Zaxby's Mailing Address 1040 Founders Blvd City Athens Purpose of Disbursement For: Gategory/ Type Category/ Type Office Sought: House GA 30606 City Athens Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Office Sought: House Disbursement For: Gategory/ Type Office Sought: House Disbursement For: Gategory/ Type Office Sought: House Disbursement For: Gategory/ Type State: District: Memol Item Substitute Disbursement For: Gategory/ Type State: District: Memol Item Substitute Disbursement For: Gategory/ Type Substitute Disbursement For:				FEC Id	dentific	ation	Numbe	er							
Transaction ID : SB21B.44738 Amount of Each Disbursement this Period Office Sought:			GA	30606											
Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Zaxby's Mailing Address 1040 Founders Blvd City Athens GA 30606 Purpose of Disbursement For: Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Office Sought: House Disbursement For: Senate Primary General Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) State: District: Substock Athens GA 30606 FEC Identification Number Category/ Type Transaction ID: SB21B.44736 Amount of Each Disbursement this Period X Memo Item Substock Athens GA 30606 FEC Identification Number Category/ Type Transaction ID: SB21B.44736 Amount of Each Disbursement this Period X Memo Item Substock Athens GA 30606 FEC Identification Number Category/ Type Transaction ID: SB21B.44736 Amount of Each Disbursement this Period		Food/Beverage (9/16/22 Usio Inc. Prepaid Debit C	ard Purchas	se)					tion I	D . CB'	24 D	4.4720			
Office Sought: House Senate Primary General Other (specify) State: District: Date of Disbursement Full Name (Last, First, Middle Initial) C. Zaxby's Mailing Address 1040 Founders Bivd City Athens GA 30606 Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Office Sought: House Disbursement For: Senate Primary General Other (specify) State: District: Memo Item Substortal of Disbursements This Page (optional)		Candidate Name								-			eriod		
Senate Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Zaxby's Mailing Address 1040 Founders Blvd City Athens Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Office Sought: House Senate Primary General Other (specify) State: District: Subtotal Primary General Other (specify) State: District: Subtotal Primary General Other (specify) Subtotal Primary General Other (specify) Subtotal Disbursement For: Subtotal Disbursement		Office Sought: House Dieburge	mont For:		Тур	е	-	-	_		_	24 21			
State: District: Full Name (Last, First, Middle Initial) C. Zaxby's Mailing Address 1040 Founders Blvd City Athens Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Candidate Name Office Sought: House Primary General President State: District: Substortal of Disbursements This Page (optional)				General				7				24.21	_		
State: District: Full Name (Last, First, Middle Initial) C. Zaxby's Mailing Address 1040 Founders Blvd City Athens Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) State: District: Substorted Address 1040 Founders Blvd Date of Disbursement FEC Identification Number Category/ Type Transaction ID: SB21B.44738 Amount of Each Disbursement this Period X Memo Item			-				Y M	ama It	om						
City Athens Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Category/ Type Office Sought: House President State: District: District: Date of Disbursement Date of Disbursement Disbursement FEC Identification Number Category/ Type Category/ Type Transaction ID: SB21B.4473: Amount of Each Disbursement this Period X Memo Item SUBTOTAL of Disbursements This Page (optional)		State: District:	l				_ IVI	erno iti	em_						
Mailing Address 1040 Founders Blvd City Athens Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) ▼ Subtotal of Disbursements This Page (optional)															
City Athens Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Category/ Type Office Sought: House President President State: District: Substate Disbursements This Page (optional)	C.	Zaxby's											_		
Athens Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Category/ Type Office Sought: House Senate Primary General President State: District: Substrict: Mainbel Category/ Type Transaction ID: SB21B.44738 Amount of Each Disbursement this Period X Memo Item 0.00		Mailing Address 1040 Founders Blvd					7	1							
Athens Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Category/ Type Office Sought: House Senate Primary President State: Disbursements This Page (optional)		City	State	Zip Code			EEC I	Nontific	ation	Numbe					
Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) State: District: Substruct: Memo Item Output Substruct: Other (specify) Substruct: Other (specify) Output Output Substruct: Other (specify) Output Output Substruct: Other (specify) Output		Athens						a Grittii C	auull	MUITIDE	JI	-			
Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) State: District: Substruct Substruct Category/ Type Amount of Each Disbursement this Period Memo Item 0.00			ard Purchas	e)		П		ansac	tion	D : SB	21B.	44739			
Office Sought: House Disbursement For: Senate Primary General President Other (specify) State: District: SUBTOTAL of Disbursements This Page (optional)		Candidate Name											eriod		
State: District: Other (specify) SUBTOTAL of Disbursements This Page (optional)		Office Sought: House Disburse	ment For:		. , , ,							24.34			
State: District: Memo Item SUBTOTAL of Disbursements This Page (optional)		Senate	Primary	General				,				- 4			
SUBTOTAL of Disbursements This Page (optional)			Other (spe	ecify) ▼			X Me	emo Ito	em						
SOBTOTAL OF DISDUISEMENTS THIS Fage (Optional)	_	State: District:													
TOTAL This Period (last page this line number only)	s	SUBTOTAL of Disbursements This Page (optional)				···· ▶					_	0.00)		
	Ļ	COTAL This Poried (lost nogo this line number or by	N					-				-	可		

	CHEDULE B (FEC Form 3X) EMIZED DISBURSEMENTS	Use separate schedule(s) (check only						LINE NUMBER: PAGE 118 OF 182						
•	LIMIZED DISBONSEMENTS		category of the Summary Page	`	X	21b	22		23		26	27		
						28a	28b		28c		29	30b		
	ny information copied from such Reports and State for commercial purposes, other than using the nar													
\rangle	NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC													
۹.	Full Name (Last, First, Middle Initial) Zaxby's Mailing Address 1040 Founders Blvd						Date	M	isburse	D /	Y	2022	Y	
		04-4-	7:- 0-1-									2022		
	City Athens	State GA	Zip Code 30606				FEC	ldent	ificatior	n Nun	nber			
	Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca						С	rans	action	ID : S	B21B	3.44740		
	Candidate Name			Cat T	egoi ype	ry/	Amou	nt of	Each	Disbu	irseme	ent this F	-	
	Office Sought: House Disburse Senate President	ment For: Primary Other (spec	General							<u> </u>	,	22.6	2	
	State: District:	` '	3, 4				X N	lemo	Item					
3.	Full Name (Last, First, Middle Initial) Zaxby's						Date	of D	isburse	_	Y	Y	Y	
	Mailing Address 1040 Founders Blvd						10		1		L	2022		
	City Athens Purpose of Disbursement	State GA	Zip Code 30606				_	ldent	ification	Num	nber	-		
	Food/Beverage (9/16/22 Usio Inc. Prepaid Debit C Candidate Name	ard Purchase	e)	Cate	egoi	ry/				_		3.44741 ent this F	eriod	
	Office Sought: House Disburse Senate President	ment For: Primary Other (spec	General		<u>, , , , , , , , , , , , , , , , , , , </u>		×					40.0	0	
	State: District:						• 1	iemo	Item					
С.	Full Name (Last, First, Middle Initial) Zaxby's						M	M	isburse		Y	YYY	Y	
	Mailing Address 1040 Founders Blvd						10		10	6	L	2022		
	,	State GA	Zip Code				FEC	ldent	ification	n Nun	nber			
	Athens Purpose of Disbursement	GA	30606				С		-		-			
	Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Ca Candidate Name	ard Purchase	9)	Cat	egoi	v/	T					3.44742 ent this F	eriod	
	Senate President	ment For: Primary Other (spec	☐ General		ype		X N	1emo	Item	•	-	42.2	4	
	State: District:						_							
S	SUBTOTAL of Disbursements This Page (optional)					<u> </u>	E	=	7	=	7	0.0	0	
Т	OTAL This Period (last page this line number only)					1 .		_		_			

17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. ANAME OF COMMITTEE (in Full) WOMEN SPEAK OUT PAC Full Name (Last, First, Middle Initial) A. Zaxby's Mailing Address 1040 Founders Bivd City Athens Office Sought: House Disbursement For: Senate President State: District: Full Name (Last, First, Middle Initial) B. Mailing Address City State Zip Code Purpose of Disbursement Disbursement For: Senate President State: District: Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement This Period Transaction ID: SB21B.44743 Amount of Each Disbursement This Period Transaction ID: SB21B.44743 Amount of Each Disbursement This Period Transaction ID: SB21B.44743 Amount of Each Disbursement This Period Transaction ID: SB21B.44743 Amount of Each Disbursement This Period Transaction ID: SB21B.44743 Amount of Each Disbursement This Period Transaction ID: SB21B.44743 Amount of Each Disbursement This Period Transaction ID: SB21B.44743 Amount of Each Disbursement This Period Transaction ID: SB21B.44743 Amount of Each Disbursement This Period Transaction ID: SB21B.44743 Amount of Each Disbursement This Period Transaction ID: SB21B.44743 Amount of Each Disbursement This Period Transaction ID: SB21B.44743 Amount of Each Disbursement This Period Transaction ID: SB21B.44743 Amount of Each Disbursement This Period Transaction ID: SB21B.44743 Amount of Each Disbursement This Period Transaction ID: SB21B.44743 Amount of Each Disbursement This Period Transaction ID: SB21B.44743 Amount of Each Disbursement This Period Transaction ID: SB21B.44743 Transaction ID: SB21B.44743 Amount of Each Disbursement This Period Transaction ID: SB21B.44743 Transaction ID: SB21B.44743 Amount of Each Disbursement This Period Transaction ID: SB21B	SCHEDULE B (FEC Form 3X)	lles com	roto och salvisi.		NE NUN			PA	GE 119 ()F 182				
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions of rot commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) WOMEN SPEAK OUT PAC Full Name (Last, First, Middle Initial) A. Zaxby's Mailing Address 1040 Founders Blvd City State Distursement Food*Beverge (BritSZ Uslo Inc. Prepaid Debit Card Purchase) Category Type Office Sought: Full Name (Last, First, Middle Initial) B. Mailing Address City State Distursement Category Type Office Sought: Full Name (Last, First, Middle Initial) B. Mailing Address City State Distursement Category Type Office Sought: Full Name (Last, First, Middle Initial) B. Mailing Address City State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State: District: Full Name (Last, First, Middle Initial) C. Amount of Each Disbursement in Period District: Mamon Item Full Name (Last, First, Middle Initial) C. Amount of Each Disbursement in Period District: Substitute: District: Substitute: District: Substitute: District: Substitute: District: Substitute: District: Amount of Each Disbursement in Period Memon Item	ITEMIZED DISBURSEMENTS			· ' —	-	· —	□ 00	7 00	cz					
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC Full Name (Last, First, Middle Initial) A. Zaxby's Mailing Address 1040 Founders Btvd City Ahams Purpose of Disbursement FoodBeverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) City Category/ Type President State Distursement From Category/ Type Fill Name (Last, First, Middle Initial) B. Date of Disbursement Candidate Name Category/ Type Fill Name (Last, First, Middle Initial) B. Date of Disbursement Candidate Name Category/ Type Fill Name (Last, First, Middle Initial) City State Purpose of Disbursement Candidate Name Category/ Type Fill Name (Last, First, Middle Initial) C. City State Distort Full Name (Last, First, Middle Initial) C. Category/ Type FEC Identification Number Category/ Type Amount of Each Disbursement this Period FEC Identification Number Candidate Name FEC Identification Number FEC Iden														
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Pull) WOMEN SPEAK OUT PAC Full Name (Last, First, Middle Initial) A. Zaxby's Mailing Address 1040 Founders Bivd City Athens Candidate Name City State Purpose of Disbursement FoodSeverage (M1622 Uslo Inc. Prepaid Debit Card Purchase) FrodSeverage (M1622 Usl	Any information copied from such Benorts and Statem	l nents may n	not be sold or us							tions				
WOMEN SPEAK OUT PAC Full Name (Last, First, Middle Initial) A. Zaxby's Mailing Address 1040 Founders Bivd City Athens Candidate Name Office Sought: House President State: Office Sought: House President Candidate Name Office Sought: Full Name (Last, First, Middle Initial) B. Mailing Address City State: Office Sought: Full Name (Last, First, Middle Initial) State: Office Sought: House President Disbursement For: Senate Primary General Office Sought: Feld Ill Name (Last, First, Middle Initial) Category/ Type Office Sought: Feld Ill Name (Last, First, Middle Initial) B. State: Disbursement Cadegory/ Type Office Sought: Feld Name Category/ Type Mamo Item State: District: Feld Name Category/ Type Office Sought: Feld Name Category/ Type Mamo Item Amount of Each Disbursement this Penod Mamo Item State: State: District: Mailing Address City State: District: Feld Name Category/ Type Mamo Item Amount of Each Disbursement this Penod Mamo Item Mamo Item Mamo Item State: State: State: District: Mailing Address City Feld Initial Disbursement this Penod Mamo Item Amount of Each Disbursement this Penod Mamo Item Mamo Item Amount of Each Disbursement this Penod Mamo Item State: State: District: Feld Initial Disbursement this Penod Mamo Item Amount of Each Disbursement this Penod Mamo Item Amount of Each Disbursement this Penod Mamo Item Amount of Each Disburse	or for commercial purposes, other than using the nam	e and addre	ess of any politic	al committe	e to soli	cit contri	butions f	rom suc	ch committ	ee.				
Full Name (Last, First, Middle Initial) A Zaxby'S Mailing Address 1040 Founders Blvd City State GA 30606 Purpose of Disbursement Food Severage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Office Sought: House Primary General Disbursement Foull Name (Last, First, Middle Initial) B. Mailing Address City State Zip Code Purpose of Disbursement For: Senate President Other (specify) ▼ State Disbursement For: Senate President Other (specify) ▼ State Zip Code FEC Identification Number Category' 7,54 Memo Item Fill Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category' Type Office Sought: House President Other (specify) General Other (specify) Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category' Type Memo Item FEC Identification Number C Amount of Each Disbursement this Period Type Office Sought: House President Other (specify) ▼ State Zip Code Purpose of Disbursement Ter: Senate Primary General Other (specify) ▼ State Zip Code FEC Identification Number C Amount of Each Disbursement this Period Memo Item Substortal of Disbursement this Period Memo Item Substortal of Disbursement this Period Memo Item	I \ ' '													
A Zaxby's Mailing Address 1040 Founders Bivd City Alhens Purpose of Disbursement Foodbeverage (9/16/22/ Usio Inc. Prepaid Debit Card Purchase) Candidate Name Office Sought:	│													
Mailing Address 1040 Founders Bilvd 10	Full Name (Last, First, Middle Initial)													
Mailing Address 1040 Founders Bivd City State City State City State Disbursement Candidate Name City State: District: Full Name (Last, First, Middle Initial) Candidate Name Office Sought: Full Name (Last, First, Middle Initial) State: District: Full Name (Last, First, Middle Initial) State: District: Full Name (Last, First, Middle Initial) Candidate Name Office Sought: Amount of Each Disbursement For: Senate President Other (specify) State Category/ Type Test Identification Number Category/ Type Test Identificat	A. Zaxby's					ate of D	isbursem	ent						
City Alhens Purpose of Disbursement Foodfeeverage (9/6/22 Usio Inc. Prepaid Debit Card Purchase) Candidate Name Office Sought:	Mailing Address 1040 Founders Blvd				- [/ Y		Y				
Athens GA 30606 Purpose of Disbursement Food/Beverage (8/16/22 Usio Inc. Prepaid Debit Card Purchase) Category/ Type Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) B. Mailing Address City State Zip Code President Senate President State: District: Category/ Type FEC Identification Number Category/ Type Memo Item Substorate In Security In Security In Security In Memo Item Substorate In Security In	- Total Control of Canadia Diva													
Purpose of Disbursement Food/Beverage (9/16/22 Usio Inc. Prepaid Debit Card Purchase) Cardidate Name Office Sought:					F	EC Iden	tification	Number						
Transaction ID: SB21B.44743 Amount of Each Disbursement this Period Office Sought:	7 11.101.10		30000											
Office Sought:		rd Purchase)				action II) : SB21	B.44743					
Office Sought:	Candidate Name				/ A	mount o	f Each D	isburser	ment this I	Period				
State: District: Other (specify) Full Name (Last, First, Middle Initial) B. Mailing Address City State Zip Code FEC Identification Number Candidate Name Candidate Name Office Sought: House President Primary General President State: District: Full Name (Last, First, Middle Initial) C. Category/ Type Titl Name (Last, First, Middle Initial) Category/ Type Office Sought: State Zip Code FEC Identification Number Candidate Name Category/ Type Office Sought: State Zip Code FEC Identification Number Category/ Type Office Sought: House Disbursement For: Category/ Type Office Sought: House Disbursement For: Gategory/ Type Office Sought: House Disbursement For: House Disbur	Office Sought: House Disbursem	nent For:		туре	$-\Gamma$				7.5	4				
State: District: Full Name (Last, First, Middle Initial) B. Mailing Address City	Senate	Primary	General		- 1									
B. Mailing Address Date of Disbursement		Other (spec	eify) ▼		>	M emo	Item							
Malling Address City														
City Purpose of Disbursement Candidate Name Office Sought:	B.					ate of D	isbursem	ent						
City State Zip Code Purpose of Disbursement Candidate Name Category/ Office Sought: House Senate Primary General City State Zip Code FEC Identification Number Category/ Type Memo Item FEC Identification Number Category/ Type Disbursement this Period Date of Disbursement Category/ Type FEC Identification Number Category/ Type FEC Identification Number Category/ Type FEC Identification Number Category/ Type Memo Item Substite: District: Memo Item Substite: Disbursement For: Senate Primary General Other (specify) Memo Item Substite: Disbursements This Page (optional)	AA-Way Adday				<u> —</u> г	M M	/ D D	/ Y	YYY	Y				
Purpose of Disbursement Candidate Name Category/ Office Sought:	Mailing Address													
Candidate Name Category/ Type	City	State	F	EC Ident	tification	Number								
Candidate Name Category/ Type	Purpose of Disbursement					\ \ \ \ \								
Office Sought: House Senate Primary General President State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Candidate Name Office Sought: House Senate Primary General Primary General Other (specify) Office Sought: House Disbursement For: Senate Primary General Other (specify) Memo Item State: District: Substitute Tipe Other (specify) Memo Item				1::		,	-							
Office Sought: House Senate Primary General Other (specify) State: District: District: Memo Item Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code FEC Identification Number Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) Memo Item State: District: Memo Item State: District: Memo Item Substituting Address City State Zip Code FEC Identification Number Category/ Type Memo Item Occupancy Memo Item Occupancy Memo Item Occupancy Memo Item	Candidate Name				/ A	Amount of Each Disbursement this Pe								
Senate Primary General Other (specify) State: District: C. Date of Disbursement City State Zip Code Purpose of Disbursement Candidate Name Office Sought: House Primary General Other (specify) Senate Primary General Memo Item Date of Disbursement Category/ Type Office Sought: House Primary General Other (specify) Senate Primary General Other (specify) State: District: Substate: District: Substate: Disbursements This Page (optional)	Office Sought: House Disbursem	nent For:		туре	-									
State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category/ Office Sought: House Disbursement For: Senate Primary General Other (specify) State: District: Substoctal of Disbursements This Page (optional)	Senate	Primary	General				7	-						
Full Name (Last, First, Middle Initial) Date of Disbursement Mailing Address City Purpose of Disbursement Candidate Name Candidate Name Office Sought: House Senate Primary Other (specify) State: District: Disbursement For: Senate Primary Other (specify) State: Substract Substract Substract Amount of Each Disbursement this Period Memo Item Occurrence Memo Item		Other (spec	ify)			Memo	Item							
City State Zip Code FEC Identification Number Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) ▼ State: District: Subtotal of Disbursement MMM / DD / YYYYYY FEC Identification Number Category/ Type Amount of Each Disbursement this Period Memo Item Occurred Memo Item						_								
City State Zip Code FEC Identification Number Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General President Other (specify) ▼ State: District: Memo Item SUBTOTAL of Disbursements This Page (optional)	C.					ate of D	isbursem	ent						
City State Zip Code FEC Identification Number Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) ▼ State: District: Memo Item Subtrotal of Disbursements This Page (optional)	Mailing Address				— r	M M	/ D D	/ Y	YY	Υ				
Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General President State: District: Substruct: Memo Item Ocategory/ Type Amount of Each Disbursement this Period Memo Item	Mailing Address									_				
Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼ State: District: Substrict: Memo Item Output Disbursement This Page (optional)	City	State	Zip Code		F	EC Ident	tification	Number						
Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) ▼ State: District: Substruct: Memo Item Ocategory/ Type Amount of Each Disbursement this Period Memo Item	Purpose of Disbursement					` "								
Office Sought: House Disbursement For: Senate Primary General Other (specify) State: District: Substrict: Memo Item	·					,								
Office Sought: House Disbursement For: Senate Primary General President Other (specify) ▼ Subtrotal of Disbursements This Page (optional)	Candidate Name				/ A	mount o	f Each D	isburser	ment this I	Period				
State: Primary General Other (specify) ▼ Substrict: Memo Item Output Substrict: Other (specify) ▼ Output Substrict: Other (specify) ▼ Output O	Office Sought: House Disbursem	nent For:		туре	-									
State: District: Memo Item SUBTOTAL of Disbursements This Page (optional)	Senate					7 7 7								
SUBTOTAL of Disbursements This Page (optional)		Other (spec	other (specify) ▼				Item							
O ACOUST OA	State. District.							_	_					
TOTAL This Period (lest page this line number only)	SUBTOTAL of Disbursements This Page (optional)						7		0.	00				
	TOTAL This Decisal (leads at 11 to 12 to 1				- [246085	01				

17

SCHEDULE B (FEC Form 3X)	Lloo sees	roto pobadista(s)	FOR LINE			PAGE 120 OF 182					
ITEMIZED DISBURSEMENTS		rate schedule(s) ategory of the	(check only		ີລາ Γີ <i>ເ</i>	ne					
		Summary Page	21b 28a	22 28b		26 27 29 30b					
Any information copied from such Reports and Statem	ents mav no	ot be sold or use	ed by any perso	on for the pur							
or for commercial purposes, other than using the nam											
NAME OF COMMITTEE (In Full)											
│ WOMEN SPEAK OUT PAC											
Full Name (Last, First, Middle Initial)											
A. American Marketing & Publishing, I	nc.			Date of Di	sbursement						
Mailing Address 2012 Stonewater Ct				10	12	2022					
,	tate	Zip Code		FEC Ident	fication Nun	nber					
Hoschton Purpose of Disbursement	GA	30548									
Non-Federal - Doorhangers - AZ				Transaction ID : SB29.44492 Amount of Each Disbursement this Period							
Candidate Name			Category/								
			Type			2265.00					
Office Sought: House Disbursem	lent ⊦or: Primary	General			7	2203.00					
	Other (speci			Memo	Itom						
State: District:				Memo	цепт						
Full Name (Last, First, Middle Initial)				5							
B. American Marketing & Publishing, I	nc.				sbursement						
Mailing Address 2012 Stonewater Ct				10 M	12	2022					
- La		- · ·									
,	tate GA	Zip Code 30548		FEC Ident	fication Nun	nber					
Purpose of Disbursement		333.3		C							
Non-Federal - Doorhangers - FL Candidate Name					B29.44493						
Candidate Name			Category/ Type	Amount of	rsement this Period						
Office Sought: House Disbursem	ent For:	I	туре			2265.00					
	Primary	General									
State: District:	Other (speci	ify)		Memo	Item						
Full Name (Last, First, Middle Initial)											
C. American Marketing & Publishing, I	nc.			Date of Di	sbursement						
				M M /	D D /	YYYY					
Mailing Address 2012 Stonewater Ct				10	12	2022					
City	tate	Zip Code		FFC Ident	fication Nun	nher					
Hoschton Purpose of Disbursement	GA	30548			modulon real						
Non-Federal - Doorhangers - GA				C							
Candidate Name			Category/		action ID : § Each Disbu	rsement this Period					
Office County			Type								
Office Sought: House Disbursem	ent For: Primary	General		2265.00							
	Other (speci			Memo Item							
State: District:				ivierno	ILEIII						
						6705.00					
SUBTOTAL of Disbursements This Page (optional)			·····•		7	6795.00					
TOTAL This Period (last page this line number only).											

ľ

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE				
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 28a	22 23 26 27			
Any information copied from such Reports and Staten or for commercial purposes, other than using the name						
NAME OF COMMITTEE (In Full)	ic and address of any politic	cai committee to	Solicit Continuations IIOM Such Committee.			
WOMEN SPEAK OUT PAC						
Full Name (Last, First, Middle Initial)			5			
A. American Marketing & Publishing,	Inc.		Date of Disbursement			
Mailing Address 2012 Stonewater Ct			10 12 2022			
,	State Zip Code		FEC Identification Number			
Hoschton Purpose of Disbursement	GA 30548					
Non-Federal - Doorhangers - NV			C			
Candidate Name		Category/	Transaction ID: SB29.44495 Amount of Each Disbursement this Period			
		Type				
Office Sought: House Disbursen			2265.00			
Senate President	Primary General Other (specify) ▼					
State: District:	onioi (apolity) ♥		Memo Item			
Full Name (Last, First, Middle Initial)						
B. Evolving Strategies			Date of Disbursement			
		M = M / D = D / Y = Y = Y				
Mailing Address 3125 1st Place North			10 06 2022			
City Arlington	State Zip Code VA 22201		FEC Identification Number			
Purpose of Disbursement Non-Federal Calls AZ, FL, NC, NV, PA,WI	C					
Candidate Name	Transaction ID: SB29.44791 Amount of Each Disbursement this Period					
Office Sought: House Disbursen	nent For: 2022	Туре	289800.00			
Senate	Primary x General					
President State: District:	Other (specify)		Memo Item			
Full Name (Last, First, Middle Initial)						
C. Headway Workforce Solutions Inc.			Date of Disbursement			
Mailing Address 3100 Smoketree Ct. Suite 900			10 09 2022			
,	State Zip Code		FEC Identification Number			
Raleigh Purpose of Disbursement	NC 27604					
Non-Federal Canvassing-AZ	C Proposition ID 00000 44744					
Candidate Name		Category/ Type	Transaction ID: SB29.44744 Amount of Each Disbursement this Period			
Office Sought: House Disbursen	nent For: 2022	775-	13801.63			
Senate	Primary X General		7 7 1			
President	Other (specify) ▼		Memo Item			
State: District:						
SUBTOTAL of Disbursements This Page (optional)		·····	305866.63			
TOTAL This Period (last page this line number only)						

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 122 OF 182				
ITEMIZED DISBURSEMENTS	Use separate schedule(s) (check only	NOMBELL.				
	for each category of the Detailed Summary Page	21h					
	Dotailou Guillilary i age	28a	28b 28c x 29 30b				
Any information copied from such Reports and State or for commercial purposes, other than using the na							
NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC							
Full Name (Last, First, Middle Initial)							
A. Headway Workforce Solutions Inc).		Date of Disbursement				
Mailing Address 3100 Smoketree Ct. Suite 900			10 09 2022				
City Raleigh	State Zip Code NC 27604		FEC Identification Number				
Purpose of Disbursement	27004		C				
Non-Federal Canvassing - FL			Transaction ID : SB29.44745				
Candidate Name		Category/ Type	Amount of Each Disbursement this Period				
Office Sought: House Disburse	ement For: 2022		15204.55				
Senate President	Primary x General Other (specify) ▼		Memo Item				
State: District:	_						
B. Headway Workforce Solutions Inc) .		Date of Disbursement				
Mailing Address 3100 Smoketree Ct. Suite 900			10 09 2022				
City Raleigh	State Zip Code NC 27604		FEC Identification Number				
Purpose of Disbursement Non-Federal Canvassing-AZ			C				
Candidate Name	Transaction ID : SB29.44746 Amount of Each Disbursement this Period						
Office Sought: House Disburse Senate	25000.00						
President	Primary General Other (specify)	Memo Item					
State: District:							
Full Name (Last, First, Middle Initial) C. Headway Workforce Solutions Inc.	:.		Date of Disbursement				
Mailing Address 3100 Smoketree Ct. Suite 900			10 09 2022				
City Raleigh	State Zip Code NC 27604		FEC Identification Number				
Purpose of Disbursement Non-Federal Canvassing - NV	C Transaction ID : SB29.44747						
Candidate Name		Category/ Type	Amount of Each Disbursement this Period				
Office Sought: House Disburse	ement For: 2022	71.	1968.16				
Senate	Primary General						
State: President	Other (specify) ▼		Memo Item				
SUBTOTAL of Disbursements This Page (optional)			42172.71				
SOBTOTAL OF DISDUISEMENTS THIS Page (Optional)			7 7 7				
TOTAL This Period (last page this line number only	y)		1				

ľ

Transaction ID: SB29-44749 Amount of Each Disbursement Non-Federal Canvassing - VM Candidate Name Office Sought: House President Non-Federal Canvassing - VM Candidate Name Office Sought: House President Non-Federal Canvassing - VM Candidate Name Office Sought: House President Non-Federal Canvassing - VM Candidate Name Office Sought: House President State: Senate Primary V General Disbursement Non-Federal Canvassing - VM Candidate Name Office Sought: House Disbursement For: 2022 Transaction ID: SB29-44749 Amount of Each Disbursement This Per State: Senate President Other (specify) Full Name (Last, First, Middle Initial) B. Headway Workforce Solutions Inc. Mailing Address 3100 Smoketree Ct. Suite 900 City Raleigh Nc 27604 Purpose of Disbursement Non-Federal Canvassing - VM Candidate Name Office Sought: House Disbursement For: 2022 Senate Primary V General Other (specify) Full Name (Last, First, Middle Initial) C. Headway Workforce Solutions Inc. Mailing Address 3100 Smoketree Ct. Suite 900 City State: District: Full Name (Last, First, Middle Initial) C. Headway Workforce Solutions Inc. Mailing Address 3100 Smoketree Ct. Suite 900 City State: District: Full Name (Last, First, Middle Initial) C. Headway Workforce Solutions Inc. Mailing Address 3100 Smoketree Ct. Suite 900 City State: District: Full Name (Last, First, Middle Initial) C. Headway Workforce Solutions Inc. Mailing Address 3100 Smoketree Ct. Suite 900 City Senate President Other (specify) State Typ Code No. 27604 Purpose of Disbursement Transaction ID: SB29.44749 Amount of Each Disbursement This Per Transaction Number Company Type City Senate President Other (specify) Transaction ID: SB29.44750 Amount of Each Disbursement This Per Type City Senate President Other (specify) Transaction ID: SB29.44750 Transaction ID: SB29.4	SCHEDULE B (FEC Form 3X) Use separate sch			FOR LINE N				
ANALE OF COMMITTEE (in Full) WOMEN SPEAK OUT PAC Full Name (Last, First, Middle Initial) A. Headway Workforce Solutions Inc. Mailing Address 3100 Smoketree Ct. Suite 900 City Raleigh President State District: Full Name (Last, First, Middle Initial) B. Headway Workforce Solutions Inc. Mailing Address 3100 Smoketree Ct. Suite 900 City Raleigh President Office Sought: Full Name (Last, First, Middle Initial) B. Headway Workforce Solutions Inc. Mailing Address 3100 Smoketree Ct. Suite 900 City Raleigh President Office Sought: Full Name (Last, First, Middle Initial) Category' Type Office Sought: Full Name (Last, First, Middle Initial) Category' Type Office Sought: Full Name (Last, First, Middle Initial) Category' Type Office Sought: Full Name (Last, First, Middle Initial) Cheadway Workforce Solutions Inc. Mailing Address 3100 Smoketree Ct. Suite 900 City Raleigh President Other (specify) Transaction ID: \$B29.44749 Amount of Each Disbursement Date of Disbursement Date of Disbursement Transaction ID: \$B29.44749 Amount of Each Disbursement Date of Di	TEMIZED DISBURSEMENTS	for each categor	y of the	21b	22			
WOMEN SPEAK OUT PAC Full Name (Last, First, Middle Initial) A. Headway Workforce Solutions Inc. Mailing Address 3100 Smoketree Ct. Suite 900 City Raleigh Purpose of Disbursement Non-Federal Caravassing - PA Candidate Name Office Sought:								
A. Headway Workforce Solutions Inc. Mailing Address 3100 Smoketree Ct. Suite 900 City Raleigh Purpose of Disbursement Non-Federal Canvassing - PA Candidate Name Office Sought: Full Name (Last, First, Middle Initial) Headway Workforce Solutions Inc. Mailing Address 3100 Smoketree Ct. Suite 900 City Raleigh Non-Federal Canvassing - WI Candidate Name Office Sought: Full Name (Last, First, Middle Initial) Headway Workforce Solutions Inc. Mailing Address 3100 Smoketree Ct. Suite 900 City Raleigh Non-Federal Canvassing - WI Candidate Name Office Sought: Furpose of Disbursement Non-Federal Canvassing - WI Candidate Name Office Sought: Full Name (Last, First, Middle Initial) Candidate Name Office Sought: Furpose of Disbursement Other (specify) Tansaction ID: \$829.44749 Amount of Each Disbursement this Per Category/ Type FEC Identification Number Category/ T	, ,							
Mailing Address 3100 Smoketree Ct. Suite 900								
Raleigh Purpose of Disbursement Non-Federal Carwassing - PA Candidate Name Office Sought: House Senate Primary X General Primary X General Disbursement this Pen State: District: Pull Name (Last, First, Middle Initial) Headway Workforce Solutions Inc. Mailing Address 3100 Smoketree Ct. Suite 900 City Raleigh Non-Federal Carwassing - WI Candidate Name Office Sought: House Disbursement For: 2022 Transaction ID: SB29.44749 Amount of Each Disbursement To general Date of Disbursement To general Date of Disbursement To general Date of Disbursement Transaction ID: SB29.44749 Amount of Each Disbursement this Pen Category/ Type Transaction ID: SB29.44749 Amount of Each Disbursement this Pen Category/ Type Transaction ID: SB29.44749 Amount of Each Disbursement this Pen Condidate Name Category/ Type Transaction ID: SB29.44749 Amount of Each Disbursement Memo Item Transaction ID: SB29.44750 Amount of Each Disbursement Transaction ID: SB29.44750 Category/ Type Transaction ID: SB29.44750 Amount of Each Disbursement Transaction ID: SB29.44750 Amount of Each Disbursement Transaction ID: SB29.44750 Amount of Each Disbursement this Pen Transaction ID: SB29.44750 Transaction ID: SB29.44750 Amount of Each Disbursement this Pen Transaction ID: SB29.44750 Transaction ID: SB29.4475	•							
Non-Federal Carvassing - PA Candidate Name Office Sought: House Senate President State: Disbursement For: 2022 Full Name (Last, First, Middle Initial) Headway Workforce Solutions Inc. Mailing Address 3100 Smoketree Ct. Suite 900 City Raleigh NC 27604 Purpose of Disbursement Non-Federal Carvassing - WI Candidate Name Office Sought: House President State: District: District: Primary x General Primary x General Primary x General President State: District: District: Primary x General Primary x General Cardegory/ Type Transaction ID: SB29.44748 Amount of Each Disbursement FEC Identification Number Category/ Type Transaction ID: SB29.44749 Amount of Each Disbursement this Pen Category/ Type Transaction ID: SB29.44749 Amount of Each Disbursement this Pen Category/ Type Transaction ID: SB29.44750 Transaction ID: SB29.44750 Amount of Each Disbursement Memo Item FEC Identification Number Category/ Type Transaction ID: SB29.44750 Amount of Each Disbursement Memo Item FEC Identification Number Category/ Type Transaction ID: SB29.44750 Amount of Each Disbursement Memo Item Memo Item Memo Item Memo Item Transaction ID: SB29.44750 Amount of Each Disbursement Type Transaction ID: SB29.44750	Raleigh					ication Number		
Office Sought:	Non-Federal Canvassing - PA			: :		action ID : SB29.44748		
Senate Primary X General Other (specify) State: District: Full Name (Last, First, Middle Initial) B. Headway Workforce Solutions Inc. Mailing Address 3100 Smoketree Ct. Suite 900 City Raleigh					Amount of			
Full Name (Last, First, Middle Initial) B. Headway Workforce Solutions Inc. Mailing Address 3100 Smoketree Ct. Suite 900 City Raleigh Purpose of Disbursement Non-Federal Canvassing - WI Candidate Name Category/ Type Other (specify) State Primary Raleigh President Non-Federal Canvassing - WI Candidate Name Category/ Type Other (specify) State: District: Mailing Address 3100 Smoketree Ct. Suite 900 City Raleigh Purpose of Disbursement For: 2022 Senate Primary X General Other (specify) Date of Disbursement this Per Memo Item FEC Identification Number Category/ Type Date of Disbursement Memo Item FEC Identification Number Category/ Type FEC Identification Number FEC Identification Number Category/ Type Transaction ID: SB29.44750 Amount of Each Disbursement this Per Transaction ID: SB29.44750 Amount of Each Disbursement this Per Transaction ID: SB29.44750 Amount of Each Disbursement this Per Transaction ID: SB29.44750 Amount of Each Disbursement this Per Transaction ID: SB29.44750 Amount of Each Disbursement this Per Transaction ID: SB29.44750 Amount of Each Disbursement this Per Transaction ID: SB29.44750 Amount of Each Disbursement this Per Transaction ID: SB29.44750 Amount of Each Disbursement this Per Transaction ID: SB29.44750 Amount of Each Disbursement this Per Transaction ID: SB29.44750 Amount of Each Disbursement this Per Transaction ID: SB29.44750 Amount of Each Disbursement this Per Transaction ID: SB29.44750 Amount of Each Disbursement this Per Transaction ID: SB29.44750 Transaction ID: SB29.44750	Senate Primary 🗶 General					y		
Mailing Address 3100 Smoketree Ct. Suite 900 City Raleigh Purpose of Disbursement Non-Federal Canvassing - WI Candidate Name Office Sought: House Senate Primary X General Other (specify) State: District: Full Name (Last, First, Middle Initial) Cally Headway Workforce Solutions Inc. Mailing Address 3100 Smoketree Ct. Suite 900 City Raleigh Purpose of Disbursement Non-Federal Mileage - AZ Candidate Name Office Sought: House Primary X General Other (specify) State Zip Code NC 27604 Purpose of Disbursement Non-Federal Mileage - AZ Candidate Name Office Sought: House Primary X General Other (specify) Memo Item Memo Item Memo Item	Full Name (Last, First, Middle Initial)							
Raleigh Purpose of Disbursement Non-Federal Canvassing - WI Candidate Name Office Sought: House Disbursement For: 2022 Senate Primary x General President Other (specify) State: District: Full Name (Last, First, Middle Initial) Headway Workforce Solutions Inc. Mailing Address 3100 Smoketree Ct. Suite 900 City Raleigh Purpose of Disbursement Non-Federal Mileage - AZ Candidate Name Office Sought: House Disbursement For: 2022 Transaction ID: SB29.44749 Amount of Each Disbursement Memo Item FEC Identification Number Category/ Type FEC Identification Number Category/ Type Office Sought: House Disbursement For: 2022 Transaction ID: SB29.44750 Amount of Each Disbursement this Per Transaction ID: SB29.44750 Amount of Each Disbursement this Per Office Sought: House Disbursement For: 2022 Transaction ID: SB29.44750 Amount of Each Disbursement this Per Office Sought: House Disbursement For: 2022 Transaction ID: SB29.44750 Amount of Each Disbursement this Per Office Sought: Primary x General Other (specify) ▼ Memo Item								
Non-Federal Canvassing - WI Candidate Name Category/ Type Office Sought: House Senate Primary X General President State: District: Memo Item Full Name (Last, First, Middle Initial) Headway Workforce Solutions Inc. Mailing Address 3100 Smoketree Ct. Suite 900 City Raleigh NC 27604 Purpose of Disbursement Non-Federal Mileage - AZ Candidate Name Office Sought: House Disbursement For: 2022 Transaction ID: SB29.44750 Amount of Each Disbursement this Period Primary X General Other (specify) FEC Identification Number Category/ Type FEC Identification Number Category/ Type Office Sought: House Disbursement For: 2022 Transaction ID: SB29.44750 Amount of Each Disbursement For: 2022 Transaction ID: SB29.44750 Amount of Each Disbursement this Period Primary X General Other (specify) ▼ Memo Item	Raleigh	'				ication Number		
Office Sought: House Disbursement For: 2022 Senate Primary X General Other (specify) Full Name (Last, First, Middle Initial) Headway Workforce Solutions Inc. Mailing Address 3100 Smoketree Ct. Suite 900 City Raleigh NC 27604 Purpose of Disbursement Non-Federal Mileage - AZ Candidate Name Category/ Type Office Sought: House Disbursement For: 2022 Senate Primary X General Other (specify) Memo Item Type Type Memo Item FEC Identification Number Category/ Type Transaction ID : SB29.44750 Amount of Each Disbursement this Periodic Amount of Each Disbursement This Periodic Amount of Each Disbursement Type Type Memo Item	Non-Federal Canvassing - WI							
Full Name (Last, First, Middle Initial) Headway Workforce Solutions Inc. Mailing Address 3100 Smoketree Ct. Suite 900 City Raleigh Purpose of Disbursement Non-Federal Mileage - AZ Candidate Name Office Sought: House Senate President Date of Disbursement 10 09 FEC Identification Number Category/ Type Transaction ID: SB29.44750 Amount of Each Disbursement this Periode Transaction ID: SP29.44750 Amount of Each Disbursement this Periode Transaction ID: SP29.44750 Memo Item	Senate President	Primary x				5116.43		
Mailing Address 3100 Smoketree Ct. Suite 900 City Raleigh Purpose of Disbursement Non-Federal Mileage - AZ Candidate Name Category/ Type Office Sought: House Senate President Disbursement For: 2022 Senate Primary General Other (specify) Memo Item	Full Name (Last, First, Middle Initial)							
Raleigh Purpose of Disbursement Non-Federal Mileage - AZ Candidate Name Category/ Type Office Sought: House Disbursement For: 2022 Senate Primary Primary Other (specify) ▼ Memo Item	_							
Non-Federal Mileage - AZ Candidate Name Category/ Type Office Sought: House Disbursement For: 2022 Senate Primary ★ General Other (specify) ▼ Memo Item	Raleigh	'			FEC Identif	ication Number		
Office Sought: House Disbursement For: 2022 Senate Primary Primary Other (specify) Memo Item	Non-Federal Mileage - AZ		[Transa			
State: District:	Senate	Primary x			Memo	4 4		
otate. Biolife.	State: District:							

Raleigh Purpose of Disbursement Non-Federal Mileage - FL Candidate Name Office Sought: House Disbursement Senate P		category/ Type	22 28b 28c x 29 30b son for the purpose of soliciting contributions of solicit contributions from such committee. Date of Disbursement Date of Disbursement PEC Identification Number C Transaction ID: SB29.44751 Amount of Each Disbursement this Period
NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC Full Name (Last, First, Middle Initial) Headway Workforce Solutions Inc. Mailing Address 3100 Smoketree Ct. Suite 900 City Raleigh Purpose of Disbursement Non-Federal Mileage - FL Candidate Name Office Sought: House Senate President Page 12 Page 14 Page 15 Page 15 Page 15 Page 16 Page 16 Page 16 Page 16 Page 17 Pa	e and address of any product ate Zip Code NC 27604 ent For: 2022 Primary X General	Category/ Type	Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC Full Name (Last, First, Middle Initial) Headway Workforce Solutions Inc. Mailing Address 3100 Smoketree Ct. Suite 900 City Raleigh Purpose of Disbursement Non-Federal Mileage - FL Candidate Name Office Sought: House Senate President President	ate Zip Code 27604 ent For: 2022 rimary x Genera	Category/ Type	Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 3100 Smoketree Ct. Suite 900 City Raleigh Purpose of Disbursement Non-Federal Mileage - FL Candidate Name Office Sought: House Senate President President	ent For: 2022 Primary X Genera	Type	FEC Identification Number C Transaction ID: SB29.44751 Amount of Each Disbursement this Period 794.54
Suite 900 City Raleigh Purpose of Disbursement Non-Federal Mileage - FL Candidate Name Office Sought: House Senate President President	ent For: 2022 Primary X Genera	Type	FEC Identification Number C Transaction ID: SB29.44751 Amount of Each Disbursement this Period 794.54
Raleigh Purpose of Disbursement Non-Federal Mileage - FL Candidate Name Office Sought: House Disbursement Senate President C	ent For: 2022 Primary X Genera	Type	Transaction ID : SB29.44751 Amount of Each Disbursement this Period
Non-Federal Mileage - FL Candidate Name Office Sought: House Disbursement Senate President C	Primary x Genera	Type	Transaction ID: SB29.44751 Amount of Each Disbursement this Period 794.54
Senate President C	Primary x Genera	Type	794.54
			Memo Item
Full Name (Last, First, Middle Initial) Headway Workforce Solutions Inc. Mailing Address 3100 Smoketree Ct.			Date of Disbursement 10 09 2022
Suite 900	ate Zip Code		
Raleigh Purpose of Disbursement Non-Federal Mileage - GA	FEC Identification Number		
Candidate Name		Category/ Type	Transaction ID : SB29.44752 Amount of Each Disbursement this Period
Senate P	ent For: 2022 Primary 🗶 General Other (specify)	al	565.64 Memo Item
Full Name (Last, First, Middle Initial) - Headway Workforce Solutions Inc.			Date of Disbursement
Mailing Address 3100 Smoketree Ct. Suite 900			10 09 2022
,	ate Zip Code NC 27604		FEC Identification Number C Transaction ID : SB29.44753
Candidate Name		Category/ Type	Amount of Each Disbursement this Period
Senate P	ent For: 2022 Primary	al	151.34 Memo Item
SUBTOTAL of Disbursements This Page (optional)		>	1511.52

SCHEDULE B (FEC Form 3X)			FOR	LINE	NUMBER	:		PAGE	125 OF	182
ITEMIZED DISBURSEMENTS	LED DIODONOLIVE I TO A and category of the I —			k only one) 21b						
	Detailed Summary Page Detailed Summary Page 210				22 28b	280		26	30b	
Any information copied from such Reports and State	ments may	not be sold or use	ad by an							ne
or for commercial purposes, other than using the nar										
NAME OF COMMITTEE (In Full)										
Full Name (Last, First, Middle Initial)										
A. Headway Workforce Solutions Inc.	·				Date o	f Disbur	sement			
M. III. A.I.I. 0400 O and along Ot					M = M	/ D	D /		Y Y Y	1
Mailing Address 3100 Smoketree Ct. Suite 900					10	-	09		2022	-
,	State	Zip Code			FEC Id	entificati	on Num	nber		
Raleigh	NC	27604							-	
Purpose of Disbursement Non-Federal Mileage - PA					С					
Candidate Name			Cata			ansactio		-	4754 nt this Pe	riod
			Catego Typo		Amoun	l OI Eac	טופטט	rseme	ווו ווווא רפ	illou
Office Sought: House Disburse	ment For:	2022				1 75			1417.52	
Senate	Primary	✗ General				,				
State: District:	Other (spe	ecity) \blacktriangledown			Me	mo Item	1			
Full Name (Last, First, Middle Initial)										
B. Headway Workforce Solutions Inc.	_				Date o	f Disbur	sement			
					M = M	/ D	D /		Y = Y = Y	7
Mailing Address 3100 Smoketree Ct. Suite 900					10		09		2022	
City Raleigh	State NC	Zip Code 27604			FEC Id	entificati	on Nun	nber		
Purpose of Disbursement	110	27004		_	С			-		
Non-Federal Mileage - WI				.		nsactio	n ID · S	B29 44	1755	
Candidate Name			Catego				-	-	nt this Pe	riod
Office Sought: House Disburse	ment For:	2022	Тур	9				-	405.74	П
Senate Sought.	Primary	General				-7		,	100.11	ш
President Other (specify)				Mc Mc	emo Item					
State: District:					IVIE	ino iten	!			
Full Name (Last, First, Middle Initial)					Doto	f Disbur	omont			
C. Headway Workforce Solutions Inc.	•				M M		D /	V	Y Y Y	-
Mailing Address 3100 Smoketree Ct.					10	J Ľ	09		2022	
Suite 900	04-4-	7:- 0-1-								
City Raleigh	State NC	Zip Code 27604			FEC Id	entificati	on Nun	nber		
Purpose of Disbursement				_	С					
Non-Federal Canvassing - GA						ansactio	n ID : S	B29.4	4766	
Candidate Name			Catego		Amoun	t of Eac	h Disbu	rseme	nt this Pe	riod
Office Sought: House Disburse	ment For:	2022	Тур	_					8407.73	
Senate	Primary	✗ General				-		,	- 40	
President	Other (spe	ecify) 🔻			Me	mo Item	1			
State: District:										
CURTOTAL of Dishuranessta This Daws (settings)									10230.99	,
SUBTOTAL of Disbursements This Page (optional)				▶	-	-	\Rightarrow	7	1230.00	#
TOTAL This Period (last page this line number only)									

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s)	FOR LINE (check only	NE NUMBER: PAGE 126 OF 182 only one)		
	for each category of the Detailed Summary Page	21b 28a	22 23 26 27 28b 28c x 29 30b		
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam					
NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC	and an arrange of any politic				
Full Name (Last, First, Middle Initial) A. Logan Circle Group, Inc.			Date of Disbursement		
Mailing Address 455 Massachusetts Ave NW Suite 150-373			10 07 2022		
,	State Zip Code 20001		FEC Identification Number		
Non-Federal Digital Ad - GA Candidate Name		Category/	Transaction ID : SB29.44479 Amount of Each Disbursement this Period		
Office Sought: House Disbursem Senate President	125000.00 Memo Item				
State: District: Full Name (Last, First, Middle Initial) B. Logan Circle Group, Inc. Mailing Address 455 Massachusetts Ave NW			Date of Disbursement 10 18 2022		
Suite 150-373	State Zip Code				
Washington Purpose of Disbursement Non-Federal Digital Ad - GA	FEC Identification Number				
Candidate Name		Category/ Type	Transaction ID: SB29.43687 Amount of Each Disbursement this Period		
Senate	nent For: 2022 Primary		500000.00 Memo Item		
Full Name (Last, First, Middle Initial) C. Montana Judicial Accountability Init	tiative		Date of Disbursement		
Mailing Address PO Box 5212			10 10 2022		
City Helena Purpose of Disbursement Non-Federal Contribution	FEC Identification Number				
Candidate Name		Category/ Type	Transaction ID: SB29.44482 Amount of Each Disbursement this Period		
	nent For: Primary ☐ General Other (specify) ▼		20000.00 Memo Item		
SUBTOTAL of Disbursements This Page (optional)			645000.00		
TOTAL This Period (last page this line number only).			1035925.61		

SCHEDULE C (FEC Form 3X) LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 127 OF 182

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full) Transaction ID: SC/10.9700 WOMEN SPEAK OUT PAC Election: **LOAN SOURCE** Full Name (Last, First, Middle Initial) Susan B Anthony List, Inc. Memo Item Primary General Mailing Address 2776 S. Arlington Mill Dr. Other (specify) ▼ PO Box 803 State City ZIP Code 22206 Arlington VA Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 77452.55 77452.55 0.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 30 11 2017 11/30/2021 0.00 X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address City State ZIP Code Amount Guaranteed Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation City State ZIP Code Amount Guaranteed Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation ZIP Code City State Amount Guaranteed Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation City ZIP Code State Amount Guaranteed Outstanding: SUBTOTALS This Period This Page (optional)..... 77452.55 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X) LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 128 OF 182

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full) Transaction ID: SC/10.13439 WOMEN SPEAK OUT PAC Election: **LOAN SOURCE** Full Name (Last, First, Middle Initial) Susan B Anthony List, Inc. Memo Item Primary General Mailing Address 2776 S. Arlington Mill Dr. Other (specify) ▼ PO Box 803 City State ZIP Code 22206 Arlington VA Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 10118.58 10118.58 0.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 30 11 2018 11/30/2022 0.00 X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Occupation Mailing Address City State ZIP Code Amount Guaranteed Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation City State ZIP Code Amount Guaranteed Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation ZIP Code City State Amount Guaranteed Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation City ZIP Code State Amount Guaranteed Outstanding: SUBTOTALS This Period This Page (optional)..... 10118.58 TOTALS This Period (last page in this line only)..... 87571.13 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 129 OF
FOR LINE NUMBER:
(check only one)

:		
		9
	X	10

182

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Donor Call Minutes Fee Campaign HQ Mailing Address 109 West Front Street State Zip Code Brooklyn IΑ 52211 Transaction ID: SD10.43679 Outstanding Balance Beginning This Period 56.35 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 56.35 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Donor Call Setup Fee Campaign HQ Mailing Address 109 West Front Street City State Zip Code Brooklyn 52211 Outstanding Balance Beginning This Period Transaction ID: SD10.43680 2880.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 2880.00 0.00 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal Fees Denton US LLP Mailing Address 1900 K Street NW City State Zip Code Washington DC 20006 Outstanding Balance Beginning This Period Transaction ID: SD10.39259 15164.00 Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period 0.00 15164.00 15164.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 130 OF
FOR LINE NUMBER:
(check only one)

	9
X	10

182

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal Fee Denton US LLP Mailing Address 1900 K Street NW State Zip Code Washington DC 20006 Transaction ID: SD10.43676 Outstanding Balance Beginning This Period 10290.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 10290.00 0.00 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Travel EAN Services LLC Mailing Address PO Box 402383 City State Zip Code Atlanta 30384 GΑ Outstanding Balance Beginning This Period Transaction ID: SD10.43677 1101.15 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 1101.15 0.00 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Travel **EAN Services LLC** Mailing Address PO Box 402383 City State Zip Code GΑ 30384 Atlanta Outstanding Balance Beginning This Period Transaction ID: SD10.43678 1422.12 Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period 0.00 1422.12 0.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Excluding Loans

(Use separate schedule(s) for each numbered line)

PAGE 131 OF FOR LINE NUMBER: (check only one)

9 **X** 10

182

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): IE-AZ Canvassing filed 10/7 (Estimate Headway Workforce Solutions Inc. Reported-This is Actual) Mailing Address 3100 Smoketree Ct. Suite 900 City State Zip Code Raleigh NC 27604 Transaction ID: SD10.44758 Outstanding Balance Beginning This Period 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 8000.00 8000.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Non-Federal Canvassing - AZ Headway Workforce Solutions Inc. Mailing Address 3100 Smoketree Ct. Suite 900 City State Zip Code Raleigh 27604 Outstanding Balance Beginning This Period Transaction ID: SD10.44759 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 8000.00 0.00 8000.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): IE-FL Canvassing filed 10/7 (Estimate Headway Workforce Solutions Inc. Reported-This is Actual) Mailing Address 3100 Smoketree Ct. Suite 900 City State Zip Code Raleigh NC 27604 Outstanding Balance Beginning This Period Transaction ID: SD10.44764 0.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 7000.00 7000.00 0.00 23000.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Excluding Loans

(Use separate schedule(s) for each numbered line)

PAGE 132 OF FOR LINE NUMBER: (check only one)

9

182

X 10 NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Non-Federal Canvassing - FL Headway Workforce Solutions Inc. Mailing Address 3100 Smoketree Ct. Suite 900 City State Zip Code Raleigh NC 27604 Transaction ID: SD10.44765 Outstanding Balance Beginning This Period 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 7000.00 7000.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): IE-GA Canvassing filed 10/7 (Estimate Headway Workforce Solutions Inc. Reported-This is Actual) Mailing Address 3100 Smoketree Ct. Suite 900 City State Zip Code Raleigh 27604 Outstanding Balance Beginning This Period Transaction ID: SD10.44769 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 22530.00 22530.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Non-Federal Canvassing - GA Headway Workforce Solutions Inc. Mailing Address 3100 Smoketree Ct. Suite 900 City State Zip Code Raleigh NC 27604 Outstanding Balance Beginning This Period Transaction ID: SD10.44770 0.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 22530.00 22530.00 52060.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Excluding Loans

(Use separate schedule(s) for each numbered line)

PAGE 133 OF 182 FOR LINE NUMBER: (check only one)

	9
v	10

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC

A. Full Name (Last, First, Middle Initial) of Debtor Headway Workforce Solutions In	Nature of Debt (Purpose): IE-NC Canvassing filed 10/7 (Estimate Reported-This is Actual)				
Mailing Address 3100 Smoketree Ct. Suite 900			_		
City	State	Zip Code			
Raleigh	NC	27604			
Outstanding Balance Beginning This Period			Transaction ID : SD10.44773		
0.00	Deve	mont This Davied	Outstanding Palance at Class of This Pariod		
Amount Incurred This Period	Pay	ment This Period	Outstanding Balance at Close of This Period		
10000.00		0.00	10000.00		
B. Full Name (Last, First, Middle Initial) of Debtor of	r Creditor		Nature of Debt (Purpose):		
Headway Workforce Solutions Inc	Э.		IE-NV Canvassing filed 10/7 (Estimate Reported-This is Actual)		
Mailing Address 3100 Smoketree Ct. Suite 900					
City	State	Zip Code			
Raleigh	NC	27604			
Outstanding Balance Beginning This Period			Transaction ID : SD10.44776		
0.00					
Amount Incurred This Period Payment This Period			Outstanding Balance at Close of This Period		
1100.00		0.00	1100.00		
C. Full Name (Last, First, Middle Initial) of Debtor Headway Workforce Solutions In			Nature of Debt (Purpose): Non-Federal Canvassing - NV		
Mailing Address 3100 Smoketree Ct. Suite 900					
City	State	Zip Code			
Raleigh	NC	27604			
Outstanding Balance Beginning This Period			Transaction ID: SD10.44778		
0.00					
Amount Incurred This Period	Pay	ment This Period	Outstanding Balance at Close of This Period		
1100.00		0.00	1100.00		
) SUBTOTALS This Period This Page (optional)		>	12200.00		
TOTALS This Period (last page this line number only)					
TOTAL OUTSTANDING LOANS from Schedule C (last page only)					
) ADD 2) and 3) and carry forward to appropriate lin	ne of Summai	ry Page (last page only) ▶			

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

PAGE 134 OF

9

182

X 10 NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): IE-PA Canvassing filed 10/7 (Estimate Headway Workforce Solutions Inc. Reported-This is Actual) Mailing Address 3100 Smoketree Ct. Suite 900 City State Zip Code Raleigh NC 27604 Transaction ID: SD10.44781 Outstanding Balance Beginning This Period 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 11000.00 11000.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Non-Federal Canvassing - PA Headway Workforce Solutions Inc. Mailing Address 3100 Smoketree Ct. Suite 900 City State Zip Code Raleigh 27604 Outstanding Balance Beginning This Period Transaction ID: SD10.44782 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 11000.00 0.00 11000.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): IE-WI Canvassing filed 10/7 (Estimate Headway Workforce Solutions Inc. Reported-This is Actual) Mailing Address 3100 Smoketree Ct. Suite 900 City State Zip Code Raleigh NC 27604 Outstanding Balance Beginning This Period Transaction ID: SD10.44785 0.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 4000.00 4000.00 0.00 26000.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Excluding Loans

(Use separate schedule(s) for each numbered line)

PAGE 135 OF FOR LINE NUMBER: (check only one)

9

182

X 10 NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Non-Federal Canvassing - WI Headway Workforce Solutions Inc. Mailing Address 3100 Smoketree Ct. Suite 900 City State Zip Code Raleigh NC 27604 Transaction ID: SD10.44786 Outstanding Balance Beginning This Period 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 4000.00 4000.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Non-Federal Mileage - WI Headway Workforce Solutions Inc. Mailing Address 3100 Smoketree Ct. Suite 900 City State Zip Code Raleigh 27604 Outstanding Balance Beginning This Period Transaction ID: SD10.44789 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 250.00 0.00 250.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): IE-WI Mileage (Estimate reported 10/7. This is Headway Workforce Solutions Inc. actual) Mailing Address 3100 Smoketree Ct. Suite 900 City State Zip Code Raleigh NC 27604 Outstanding Balance Beginning This Period Transaction ID: SD10.44790 0.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 250.00 250.00 4500.00 1) SUBTOTALS This Period This Page (optional).....

2) TOTALS This Period (last page this line number only).....

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Excluding Loans

(Use separate schedule(s) for each numbered line)

PAGE 136 OF FOR LINE NUMBER: (check only one)

9

182

X 10 NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): IE-AZ Mileage (Estimate reported 10/7. This is Headway Workforce Solutions Inc. actual) Mailing Address 3100 Smoketree Ct. Suite 900 City State Zip Code Raleigh NC 27604 Transaction ID: SD10.44796 Outstanding Balance Beginning This Period 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 600.00 600.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Non-Federal Mileage - AZ Headway Workforce Solutions Inc. Mailing Address 3100 Smoketree Ct. Suite 900 City State Zip Code Raleigh 27604 Outstanding Balance Beginning This Period Transaction ID: SD10.44797 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 600.00 0.00 600.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): IE-FL Mileage (Estimate reported 10/7. This is Headway Workforce Solutions Inc. actual) Mailing Address 3100 Smoketree Ct. Suite 900 City State Zip Code Raleigh NC 27604 Outstanding Balance Beginning This Period Transaction ID: SD10.44800 0.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 400.00 400.00 1600.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Excluding Loans

(Use separate schedule(s) for each numbered line)

PAGE 137 OF FOR LINE NUMBER: (check only one)

9

182

X 10 NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Non-Federal Mileage - FL Headway Workforce Solutions Inc. Mailing Address 3100 Smoketree Ct. Suite 900 City State Zip Code Raleigh NC 27604 Transaction ID: SD10.44801 Outstanding Balance Beginning This Period 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 400.00 400.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): IE-GA Mileage (Estimate reported 10/7. This Headway Workforce Solutions Inc. is actual) Mailing Address 3100 Smoketree Ct. Suite 900 City State Zip Code Raleigh 27604 Outstanding Balance Beginning This Period Transaction ID: SD10.44804 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 400.00 0.00 400.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Non-Federal Mileage - GA Headway Workforce Solutions Inc. Mailing Address 3100 Smoketree Ct. Suite 900 City State Zip Code Raleigh NC 27604 Outstanding Balance Beginning This Period Transaction ID: SD10.44805 0.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 400.00 400.00 1200.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Excluding Loans

(Use separate schedule(s) for each numbered line)

PAGE 138 OF FOR LINE NUMBER: (check only one)

9

182

X 10 NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): IE-NC Mileage (Estimate reported 10/7. This Headway Workforce Solutions Inc. is actual) Mailing Address 3100 Smoketree Ct. Suite 900 City State Zip Code Raleigh NC 27604 Transaction ID: SD10.44808 Outstanding Balance Beginning This Period 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 1200.00 1200.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): IE-NV Mileage (Estimate reported 10/7. This Headway Workforce Solutions Inc. is actual) Mailing Address 3100 Smoketree Ct. Suite 900 City State Zip Code Raleigh 27604 Outstanding Balance Beginning This Period Transaction ID: SD10.44811 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 150.00 150.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Non-Federal Mileage - NV Headway Workforce Solutions Inc. Mailing Address 3100 Smoketree Ct. Suite 900 City State Zip Code Raleigh NC 27604 Outstanding Balance Beginning This Period Transaction ID: SD10.44812 0.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 150.00 150.00 1500.00 1) SUBTOTALS This Period This Page (optional).....

2) TOTALS This Period (last page this line number only).....

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)

FEC Schedule D (Form 3X) Rev. 05/2016

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

PAGE 139 OF

9 **X** 10

182

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): IE-PA Mileage (Estimate reported 10/7. This is Headway Workforce Solutions Inc. actual) Mailing Address 3100 Smoketree Ct. Suite 900 City State Zip Code Raleigh NC 27604 Transaction ID: SD10.44815 Outstanding Balance Beginning This Period 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 700.00 700.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Non-Federal Mileage - PA Headway Workforce Solutions Inc. Mailing Address 3100 Smoketree Ct. Suite 900 City State Zip Code Raleigh 27604 Outstanding Balance Beginning This Period Transaction ID: SD10.44816 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 700.00 700.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Estimate digital ads Media Bridge Mailing Address 11300 Astarita Ave City State Zip Code 22534 Partlow VA Outstanding Balance Beginning This Period Transaction ID: SD10.15740 2000.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 2000.00 3400.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 140 OF
FOR LINE NUMBER:
(check only one)

9 **X** 10

182

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Existing Loan owed to SBA Susan B Anthony List, Inc. Mailing Address 2776 S. Arlington Mill Dr. PO Box 803 City State Zip Code Arlington VΑ 22206 Transaction ID: SD10.4157 Outstanding Balance Beginning This Period 10500.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 10500.00 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Loan for FEC Reporting Services Susan B Anthony List, Inc. Mailing Address 2776 S. Arlington Mill Dr. PO Box 803 City State Zip Code Arlington 22206 Outstanding Balance Beginning This Period Transaction ID: SD10.4110 5000.00 Amount Incurred This Period Outstanding Balance at Close of This Period Payment This Period 0.00 5000.00 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailings Expense Susan B Anthony List, Inc. Mailing Address 2776 S. Arlington Mill Dr. PO Box 803 City State Zip Code Arlington 22206 VA Outstanding Balance Beginning This Period Transaction ID: SD10.4318 5204.43 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 5204.43 20704.43 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

PAGE 141

9

OF

182

X 10 NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Original transactions put on SBA CC Susan B Anthony List, Inc. Mailing Address 2776 S. Arlington Mill Dr. PO Box 803 City State Zip Code Arlington VΑ 22206 Transaction ID: SD10.6625 Outstanding Balance Beginning This Period 8610.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 8610.00 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Expense put on SBA CC Susan B Anthony List, Inc. Mailing Address 2776 S. Arlington Mill Dr. PO Box 803 City State Zip Code Arlington 22206 Outstanding Balance Beginning This Period Transaction ID: SD10.6756 4709.73 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 4709.73 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): To post Thrifty Car Rental Expense put on Susan B Anthony List, Inc. SBA Card Mailing Address 2776 S. Arlington Mill Dr. PO Box 803 City State Zip Code Arlington 22206 VA Outstanding Balance Beginning This Period Transaction ID: SD10.9222 1894.83 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 1894.83 15214.56 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 142 OF
FOR LINE NUMBER:
(check only one)

9 **X** 10

182

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Non-Federal - Supplies Susan B Anthony List, Inc. Mailing Address 2776 S. Arlington Mill Dr. PO Box 803 City State Zip Code Arlington VΑ 22206 Transaction ID: SD10.15960 Outstanding Balance Beginning This Period 200.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 200.00 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Non-Federal - Travel Susan B Anthony List, Inc. Mailing Address 2776 S. Arlington Mill Dr. PO Box 803 City State Zip Code Arlington 22206 Outstanding Balance Beginning This Period Transaction ID: SD10.15958 27.90 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 27.90 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Salary / Contractor Pay Susan B Anthony List, Inc. Mailing Address 2776 S. Arlington Mill Dr. PO Box 803 City State Zip Code Arlington 22206 VA Outstanding Balance Beginning This Period Transaction ID: SD10.39334 4324.16 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 4324.16 4552.06 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 143 OF
FOR LINE NUMBER:
(check only one)

9

182

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal Fees Susan B Anthony List, Inc. Mailing Address 2776 S. Arlington Mill Dr. PO Box 803 City State Zip Code Arlington VΑ 22206 Transaction ID: SD10.41208 Outstanding Balance Beginning This Period 4950.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 4950.00 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailer Production- Tradewinds See Schedule Susan B Anthony List, Inc. Mailing Address 2776 S. Arlington Mill Dr. PO Box 803 City State Zip Code Arlington 22206 Outstanding Balance Beginning This Period Transaction ID: SD10.41901 15000.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 15000.00 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): payroll, travel, rent, IT security, consulting, Susan B Anthony List, Inc. database, office supplies Mailing Address 2776 S. Arlington Mill Dr. PO Box 803 City State Zip Code Arlington 22206 VA Outstanding Balance Beginning This Period Transaction ID: SD10.43634 61597.50 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 61597.50 81547.50 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 144 OF
FOR LINE NUMBER:
(check only one)

9 **X** 10

182

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): payroll, travel, rent, IT security, consulting, Susan B Anthony List, Inc. database, office supplies Mailing Address 2776 S. Arlington Mill Dr. PO Box 803 State Zip Code Arlington VA 22206 Transaction ID: SD10.44496 Outstanding Balance Beginning This Period 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 40501.40 40501.40 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Direct Mail Susan B Anthony List, Inc. Mailing Address 2776 S. Arlington Mill Dr. PO Box 803 City State Zip Code Arlington 22206 Outstanding Balance Beginning This Period Transaction ID: SD10.44823 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 9459.42 9459.42 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailing Address City State Zip Code Outstanding Balance Beginning This Period Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period 49960.82 1) SUBTOTALS This Period This Page (optional)..... 312603.37 2) TOTALS This Period (last page this line number only)..... 0.00 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) 312603.37 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

TEMIZED INDEPENDENT EXPENDITURES				PAGE 145 OF 182 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee American Marketing & Publishing, Inc.		☐ Memo	Item Da	ate of Public Distribution/Dissemination
Mailing Address 2012 Stonewater Ct			Aı	mount 10 10 2022
City	State	Zip Code	 [1132.50
Hoschton	GA	30548		ransaction ID : SE.43350 ate of Disbursement or Obligation
Purpose of Expenditure Door Hangers	I	Category/ Type 004		10 12 2022
Name of Federal Candidate:		✗ Support	Office So	ought: House District: 00
MASTERS, BLAKE, , ,		Oppose		esident X Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	1050848.63	Disburse 2022	ment For: Primary General Other (specify) ▶
Full Name of Payee		Memo	Item Di	ate of Public Distribution/Dissemination
American Marketing & Publishing, Inc	.			M M / D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y
Mailing Address 2012 Stonewater Ct			Aı	mount
City	State	Zip Code	<u> —</u> Г	1132.50
Hoschton	GA	30548		ransaction ID : SE.43352 ate of Disbursement or Obligation
Purpose of Expenditure Door Hangers		Category/ Type 004		10 12 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office So	ought: House District: 00
KELLY, MARK, , ,		x Oppose	Pr	esident Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought	7	1051981.13	Disburse 2022	ment For:
(a) SUBTOTAL of Itemized Independent Expenditures				2265.00
(b) SUBTOTAL of Unitemized Independent Expenditure	res			
			F	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gross, Jennifer, , ,	Electronically Fil	led1 -	M = M	/ D D / Y Y Y Y Y
Signature	omoung I'u	Date	e 10	27 2022

TEMIZED INDEPENDENT EXPENDITURES			PAGE 146 OF 182 FOR LINE 24 OF FORM 3X		
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼		
WOMEN SPEAK OUT PAC			C C00530766		
			C 00030700		
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on M M / D D / Y Y Y Y		
Full Name of Payee American Marketing & Publishing, Inc.		☐ Memo	Date of Public Distribution/Dissemination		
, another manifesting a reasoning, mer			10 10 7 2022		
Mailing Address 2012 Stonewater Ct			Amount		
City	State	Zip Code	1132.50		
Hoschton	GA	30548	Transaction ID : SE.43356 Date of Disbursement or Obligation		
Purpose of Expenditure Door Hangers		Category/ Type 004	M M / D D / Y Y Y		
Name of Federal Candidate:		✗ Support	Office Sought: House District: 00		
RUBIO, MARCO, , ,		Oppose	President X Senate State: FL		
Calendar Year-To-Date			Disbursement For: Primary		
Per Election for Office Sought	7	53224.80	2022 Other (specify) ▶		
Full Name of Payee American Marketing & Publishing, Inc	Date of Public Distribution/Dissemination				
Mailing Address 2012 Stonewater Ct			Amount		
City	State	Zip Code	1132.50		
Hoschton	GA	30548	Transaction ID : SE.43357 Date of Disbursement or Obligation		
Purpose of Expenditure Door Hangers		Category/ Type 004	M M / D D / Y Y Y		
Name of Federal Candidate:		Support	Office Sought: House District: 00		
DEMINGS, VAL, , ,		x Oppose	President Senate State: FL		
Calendar Year-To-Date Per Election for Office Sought	,	54357.30	Disbursement For: ☐ Primary X General 2022 ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			2265.00		
.,			7 7		
(b) SUBTOTAL of Unitemized Independent Expenditure	es		·		
(c) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized				
Gross, Jennifer, , ,	Electronically Fil	od1	M M / D D / Y Y Y Y		
Signature	<u> гаса отсину</u> Ги	_ Date	e 10 27 2022		

SCHEDULE E (FEC FOIII 3X)			
TEMIZED INDEPENDENT EXPENDITURES			PAGE 147 OF 182 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC			
			C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repor	rt filed on
Full Name of Payee American Marketing & Publishing, Inc.		☐ Memo I	M M / D D / Y Y Y Y
Mailing Address 2012 Stonewater Ct			10 10 2022 Amount
City	State	Zip Code	1132.50
Hoschton	GA	30548	Transaction ID : SE.43361
Purpose of Expenditure		00040	Date of Disbursement or Obligation
Door Hangers		Category/ Type 004	10 12 7 2022
Name of Federal Candidate:		X Support	Office Sought: House District: 00
WALKER, HERSCHEL MR., , ,		Oppose	President Senate State: GA
Calendar Year-To-Date Per Election for Office Sought	7	181576.82	Disbursement For: ☐ Primary
Full Name of Payee American Marketing & Publishing, Ind) .	☐ Memo I	Date of Public Distribution/Dissemination Date of Public Distribution/Dissemination
Mailing Address 2012 Stonewater Ct			Amount
City	State	Zip Code	1132.50
Hoschton	GA	30548	Transaction ID : SE.43362 Date of Disbursement or Obligation
Purpose of Expenditure Door Hangers		Category/ Type 004	10 12 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sought: House District: 00
WARNOCK, RAPHAEL, , ,		x Oppose	President Senate State: GA
Calendar Year-To-Date Per Election for Office Sought	7 1 7	182709.32	Disbursement For: ☐ Primary
(a) SUBTOTAL of Itemized Independent Expenditures	i		2265.00
(b) SUBTOTAL of Unitemized Independent Expenditure	res		·
(c) TOTAL Independent Expenditures			>
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized	•	·
Gross, Jennifer, , ,	[Electronically Fil	led1 -	M = M / D = D / Y = Y = Y
0:	T	Date	10 27 2022

TEMIZED INDEPENDENT EXPENDITURES				PAGE 148 OF 182
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
WOMEN SPEAK OUT PAC			FEC	IDENTIFICATION NUMBER ▼
THE METERS OF LAW COLLETE			C	C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repor	t filed on	/ D D / Y Y Y Y Y
Full Name of Payee American Marketing & Publishing, Inc.		☐ Memo I	M = M	olic Distribution/Dissemination
Mailing Address 2012 Stonewater Ct			Amount	10 2022
City	State	Zip Code		1132.50
Hoschton	GA	30548	Transaction	n ID : SE.43365
	GA	30340		bursement or Obligation
Purpose of Expenditure Door Hangers		Category/ Type 004	10	1 12 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		✗ Support	Office Sought:	House District:00
LAXALT, ADAM, , ,		Oppose	President	Senate State: NV
Colondor Vene To Data			Disbursement For:	
Calendar Year-To-Date Per Election for Office Sought	· · · ·	15088.43	2022 —	specify) ▶
Full Name of Payee		☐ Memo I	1	olic Distribution/Dissemination
American Marketing & Publishing, Inc			10	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2012 Stonewater Ct			Amount	
City	State	Zin Codo		1132.50
City Hoschton		Zip Code		n ID : SE.43366
	GA	30548		bursement or Obligation
Purpose of Expenditure Door Hangers		Category/ Type 004	M M 10	12 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sought:	House District:00
CORTEZ MASTO, CATHERINE, , ,		X Oppose	President	Senate State: NV
Calendar Year-To-Date		-	Disbursement For:	
Per Election for Office Sought	7 7	16220.93	2022 —	specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			>	2265.00
(b) SUBTOTAL of Unitemized Independent Expenditur	es			
(b) 00210 M2 of officering and openion at Experional				
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
Gross, Jennifer, , ,	Electronically Fil	/ed1 _	M M / D = 27	D / Y Y Y Y Y
	I'll	Date	10 27	2022

TEMIZED INDEPENDENT EXPENDITURES				PAGE 149 OF 182
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
WOMEN SPEAK OUT PAC				C IDENTIFICATION NUMBER ▼
				C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repor	t filed on	/ D D / Y Y Y Y
Full Name of Payee Campaign Inbox, LLC		☐ Memo I	tem Date of F	
Mailing Address PO Box 541525			10	03 2022
. 0 25/0 1/025			Amount	
City	State	Zip Code		150.00
Orlando	FL	32804		ion ID : SE.43279 Disbursement or Obligation
Purpose of Expenditure Fundraising Email		Category/ Type 004	10	M / D D / Y Y Y
Name of Federal Candidate:		Support	Office Sought:	House District: 00
KELLY, MARK, , ,		X Oppose	President	Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought	7 7	1033010.37	Disbursement For 2022 Othe	or: Primary X General r (specify) ▶
Full Name of Payee Campaign Inbox, LLC		☐ Memo I	Date of F	
Mailing Address PO Box 541525			Amount	
City	State	Zip Code	-	1149.90
Orlando	FL	32804	Transac	tion ID : SE.43278 Disbursement or Obligation
Purpose of Expenditure Texting	1	Category/ Type 004	10	M / D D / Y Y Y
Name of Federal Candidate:		Support	Office Sought:	House District: 00
KELLY, MARK, , ,		x Oppose	President	Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought	7	1034160.27	Disbursement For 2022 Othe	or: Primary X General r (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			>	1299.90
(b) SUBTOTAL of Unitemized Independent Expenditure	es		.	77
(c) TOTAL Independent Expenditures			•	7
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized			
Gross, Jennifer, , ,	Electronically Fil	[ed] Date	M M / D	27 2022

TEMIZED INDEPENDENT EXPENDITURES			PAGE 150 OF 182
NAME OF COMMITTEE (In Full)			FOR LINE 24 OF FORM 3X
WOMEN SPEAK OUT PAC			FEC IDENTIFICATION NUMBER ▼
WOWLIN OF EARL OOF TAKE			C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends report	filed on M M / D D / Y Y Y Y Y
Full Name of Payee Headway Workforce Solutions Inc.		🗶 Memo Ite	Date of Public Distribution/Dissemination 10 05 2022
Mailing Address 3100 Smoketree Ct.			10 03 2022
Suite 900			Amount
City	State	Zip Code	4000.00
Raleigh	NC	27604	Transaction ID : SE.44756
Purpose of Expenditure Canvassing (Estimate Reported 10/7. This is Actual next period)	and paid	Category/ Type 004	Date of Disbursement or Obligation
Name of Federal Candidate:		Support (Office Sought: House District: 00
RUBIO, MARCO, , ,		Oppose	President X Senate State: FL
Calendar Year-To-Date			Disbursement For: Primary X General
Per Election for Office Sought	, , ,		022 Other (specify) ▶
Full Name of Payee Headway Workforce Solutions Inc.		X Memo Ite	Date of Public Distribution/Dissemination 10 Date of Public Distribution/Dissemination 2022
Mailing Address 3100 Smoketree Ct. Suite 900			Amount
City	State	Zip Code	4000.00
Raleigh	NC	27604	Transaction ID : SE.44757 Date of Disbursement or Obligation
Purpose of Expenditure Canvassing (Estimate Reported 10/7. This is actual next period)	Il and paid	Category/ Type 004	M M / D D / Y Y Y Y
Name of Federal Candidate:		Support	Office Sought: House District: 00
DEMINGS, VAL, , ,		x Oppose	President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought	· · · · ·	00000 40	Disbursement For: Primary ☐ General ☐ Other (specify) ☐
(a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditure (c) TOTAL Independent Expenditures	res) 0.00)
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized agent.	I committee or agent of	
Gross, Jennifer, , ,	Electronically Fil	led] Date	10 27 2022

TEMIZED INDEPENDENT EXPENDITURES			PAGE 151 OF 182
			FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC			FEC IDENTIFICATION NUMBER ▼
WOWEN SPEAK OUT PAC			C C00530766
Check if 24-hour report 48-hour report	New rep	ort Amends report	filed on M M / D D / Y Y Y Y
Full Name of Payee Headway Workforce Solutions Inc.		X Memo Ite	Date of Public Distribution/Dissemination 10 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 3100 Smoketree Ct.			10 00 202
Suite 900			Amount
City	State	Zip Code	3500.00
Raleigh	NC	27604	Transaction ID : SE.44760 Date of Disbursement or Obligation
Purpose of Expenditure Canvassing (Estimate Reported 10/7. This is Actual Next Period)	and Paid	Category/ Type 004	M = M / D = D / Y = Y = Y
Name of Federal Candidate:		X Support (Office Sought: House District: 00
MASTERS, BLAKE, , ,		Oppose	President Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought	, , ,		Disbursement For: Primary ☐ General Other (specify) ☐ Other
Full Name of Payee Headway Workforce Solutions Inc. Mailing Address 2400 Straketon Ct		⋉ Memo Ite	Date of Public Distribution/Dissemination M 10 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
3100 Smoketree Ct. Suite 900			Amount
City	State	Zip Code	3500.00
Raleigh	NC	27604	Transaction ID : SE.44763 Date of Disbursement or Obligation
Purpose of Expenditure Canvassing (Estimate Reported 10/7. This is actual next period)	l and paid	Category/ Type 004	M = M / D = D / Y = Y = Y
Name of Federal Candidate:		Support	Office Sought: House District: 00
KELLY, MARK, , ,		x Oppose	President X Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought	, , ,	400440007	Disbursement For: Primary ☐ Primary ☐ General ☐ Other (specify) ☐ ☐
(a) SUBTOTAL of Itemized Independent Expenditures			0.00
(b) SUBTOTAL of Unitemized Independent Expenditure	es		>
(c) TOTAL Independent Expenditures			>
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized		
Gross, Jennifer, , ,	Electronically Fil	led] Date	10 27 2022

	P	AGE 1	52	OF	182
	_	OR LINE			RM 3X
FEC		NTIFICA			
С		C005307			
- М	/	D D	/ Y	Y	Y
of Pub	olic [Distributi	on/Dis	semin	ation
10 ^M	/	05	/ Y	ž0	22 Y
nt					
	7		7	11265	
		: SE.44 7 sement o		ation	
- M	/	D D	/ Y	Y	Y
t:		House	Dist	trict: _	00
ent	×	Senate	St	ate: _	GA
t For:		Prim	ary	×	General
ther (spe	cify) ▶ _			
	lic [Distributi	on/Diss	semin	ation
10 ^M	/	05	/ Y	Ž0:	22 Y
nt					
) : SE.44	768	11265	.00
		ement o	_		V V
- IVI	ľ	5 - 5		- 1 '	1
		House	Dist	trict: _	00
t:		1	C4	ate: _	GA
	X	Senate	31		
ent		Senate Prim		×	Seneral
t: ent t For: ther (:				x (Seneral
ent t For:		Prim	ary	X (General
ent t For: ther (spec	Prim	ary	0.0	_
ent t For: ther (spec	Prim	ary		_
ent t For: ther (spec	Prim	ary	0.0	_
ent t For: ther (:	spec	Prim	ary	0.0	_

NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼		
WOMEN SPEAK OUT PAC				C C00530766		
Check if 24-hour report 48-hour report New report Amends report filed on 48-hour report						
Full Name of Payee X Memo Item Date of Public Distribution/Dissemination						
Headway Workforce Solutions Inc.	M	10 05 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Mailing Address 3100 Smoketree Ct.	Amour	nt				
Suite 900 City	State	Zip Code		11265.00		
Raleigh	NC	27604		action ID : SE.44767 of Disbursement or Obligation		
Purpose of Expenditure Canvassing (Estimate filed 10/7. This is actual but period)	aid in next	Category/ Type 004	M	M		
Name of Federal Candidate:		X Support	Office Sough	it: House District: 00		
WALKER, HERSCHEL MR., , ,		Oppose	Preside	ent Senate State: GA		
Calendar Year-To-Date			Disbursemen	t For: Primary X General		
Per Election for Office Sought	7	21470.92	2022 —	ther (specify) ▶		
Full Name of Payee		✗ Memo	Item Date of	of Public Distribution/Dissemination		
,	Headway Workforce Solutions Inc.			10 05 7 2022		
Mailing Address 3100 Smoketree Ct.				nt		
Suite 900		1				
City	State	Zip Code		11265.00		
Raleigh	Raleigh NC 27604			saction ID: SE.44768 of Disbursement or Obligation		
Purpose of Expenditure Canvassing (Estimate filed 10/7/22. This is actual but paid in next period) Category/ Type 004						
Name of Federal Candidate:		Support	Office Sough	it: House District: 00		
WARNOCK, RAPHAEL, , ,		x Oppose	Preside	ent Senate State: GA		
Calendar Year-To-Date Per Election for Office Sought		21470.92	Disbursemen	t For: Primary 🗶 General		
Per Election for Office Sought	1 1		0	ther (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			•	0.00		
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•	7		
(c) TOTAL Independent Expenditures	(c) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized					
Gross, Jennifer, , ,	Electronically Fil	led1	M = M /	07		
Signature	лисионици Ги	Date	10	27 2022		
-				FEC Schedule E (Form 3X) Rev. 05/2016		

NAME OF COMMITTEE (In Full)

Full Name of Payee

Purpose of Expenditure

Mailing Address

Check if

City

Raleigh

next period.)

WOMEN SPEAK OUT PAC

24-hour report

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

Headway Workforce Solutions Inc.

Suite 900

3100 Smoketree Ct.

Canvassing (Estimate reported 10/7. This is actual and paid in

48-hour report

New report

State

NC

FOR LINE 24 OF FORM 3X FEC IDENTIFICATION NUMBER C C00530766 On M M / D D / Y Y Y Y Date of Public Distribution/Dissemination M 10 / D D / Y Y Y Y Amount 5000.00 Transaction ID: SE.44771 Date of Disbursement or Obligation
On M M / D D / Y Y Y Y Y Date of Public Distribution/Dissemination M M M / D D / Y Y Y Y Y 10 05 / Y 2022 Amount 5000.00 Transaction ID : SE.44771 Date of Disbursement or Obligation
Date of Public Distribution/Dissemination M M M / D D / Y Y Y Y Y 10 05 / Y 2022 Amount 5000.00 Transaction ID : SE.44771 Date of Disbursement or Obligation
Date of Public Distribution/Dissemination M M O O O O O O O O O O O O O O O O O
Amount 5000.00 Transaction ID: SE.44771 Date of Disbursement or Obligation
Amount 5000.00 Transaction ID : SE.44771 Date of Disbursement or Obligation
5000.00 Transaction ID : SE.44771 Date of Disbursement or Obligation
Transaction ID : SE.44771 Date of Disbursement or Obligation
Transaction ID : SE.44771 Date of Disbursement or Obligation
M M / D D / Y Y Y Y
Sought: House District: 00
President Senate State: NC
rsement For: Primary General Other (specify) ▶
Date of Public Distribution/Dissemination
10 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Amount
5000.00
Transaction ID : SE.44772
Date of Disbursement or Obligation
M M / D D / Y Y Y Y
Sought: House District: 00
President Senate State: NC
rsement For: Primary X General
Other (specify)

TEMIZED INDEPENDENT EXPENDITURES				PAGE 154 OF 182 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo		M / D D / Y Y Y Y
Full Name of Payee		✗ Memo	Item Date	of Public Distribution/Dissemination
Headway Workforce Solutions Inc.			1	10 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 3100 Smoketree Ct.				
Suite 900			Amou	nt
City	State	Zip Code		550.00
Raleigh	NC	27604	Trans	saction ID : SE.44774 of Disbursement or Obligation
Purpose of Expenditure Canvassing (Estimate reported 10/7. This is actual at next period)	nd paid in	Category/ Type 004		/ M / D D / Y Y Y Y
Name of Federal Candidate:		✗ Support	Office Sough	nt: House District:00
LAXALT, ADAM, , ,		Oppose	Presid	ent Senate State: NV
Calendar Year-To-Date Per Election for Office Sought	, , ,	11836.41	Disbursemer	nt For: Primary X General Other (specify) ▶
Full Name of Payee		★ Memo		of Public Distribution/Dissemination
Headway Workforce Solutions Inc.		Weille		/ M M / D D / Y Y Y Y Y
Mailing Address			L	10 05 2022
3100 Smoketree Ct. Suite 900			Amou	nt
City	State	Zip Code	<u> П</u> Г.	550.00
Raleigh	NC	27604	II	saction ID : SE.44775
Purpose of Expenditure Canvassing (Estimate reported 10/7. This is actual a next period)	and paid in	Category/ Type 004		of Disbursement or Obligation
Name of Federal Candidate:		Support	Office Sough	nt: House District:00
CORTEZ MASTO, CATHERINE, , ,		x Oppose	Presid	ent Senate State: NV
Calendar Year-To-Date Per Election for Office Sought	7 7	11836.41	Disbursemer 2022	nt For: Primary
(a) SUBTOTAL of Itemized Independent Expenditures .			•	0.00
			_	
(b) SUBTOTAL of Unitemized Independent Expenditure	es		•	
(c) TOTAL Independent Expenditures			.	
Under penalty of perjury I certify that the independer with, or at the request or suggestion of, any candidat party committee) any political party committee or its a	te or authorized			
Gross, Jennifer, , ,	Electronically Fil	ed1	M = M /	D D / Y Y Y Y Y Y
Signature	эксионишу Г ш	Date	10	27 2022

TEMIZED INDEPENDENT EXPENDITURES			PAGE 155 OF 182
NAME OF COMMITTEE (I. F. II)			FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC			C C00530766
Check if 24-hour report 48-hour report	New rep	ort Amends report fi	iled on M M / D D / Y Y Y Y
Full Name of Payee Headway Workforce Solutions Inc.		🗶 Memo Iter	Date of Public Distribution/Dissemination
Mailing Address 3100 Smoketree Ct.			
Suite 900			Amount
City	State	Zip Code	5500.00
Raleigh	NC	27604	Transaction ID : SE.44779 Date of Disbursement or Obligation
Purpose of Expenditure Canvassing (Estimate reported 10/7. This is actual a next period)	and paid in	Category/ Type 004	M M / D D / Y Y Y Y
Name of Federal Candidate:		X Support O	ffice Sought: House District: 00
OZ, MEHMET DR, , ,		Oppose	President State: PA
Calendar Year-To-Date Per Election for Office Sought	7	41567.90 D 20	isbursement For: ☐ Primary X General 22 ☐ Other (specify) ▶
Full Name of Payee Headway Workforce Solutions Inc. Mailing Address		⋉ Memo Iter	Date of Public Distribution/Dissemination
3100 Smoketree Ct. Suite 900			Amount
City	State	Zip Code	5500.00
Raleigh	NC	27604	Transaction ID : SE.44780 Date of Disbursement or Obligation
Purpose of Expenditure Canvassing (Estimate reported 10/7. This is actual next period)	and paid in	Category/ Type 004	M = M / D = D / Y = Y = Y
Name of Federal Candidate:		Support O	ffice Sought: House District: 00
FETTERMAN, JOHN KARL, , ,		x Oppose	President Senate State: PA
Calendar Year-To-Date Per Election for Office Sought	7	44507.00	isbursement For:
(a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditure		,	0.00
(b) 306101AL of Officernized independent Expenditure	es		
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized		
Gross, Jennifer, , ,	Electronically Fil	ded] Date	10 27 2022

TEMIZED INDEPENDENT EXPENDITURES				PAGE 156 OF 182
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
WOMEN SPEAK OUT PAC				FEC IDENTIFICATION NUMBER ▼
				C C00530766
Check if 24-hour report 48-hour report	New rep	ort Amends repo	rt filed on	M
Full Name of Payee Headway Workforce Solutions Inc.		🗶 Memo	Item Date	of Public Distribution/Dissemination
Mailing Address 3100 Smoketree Ct.				10 00 2022
Suite 900			Amou	ınt
City	State	Zip Code	$-\Gamma$	2000.00
Raleigh	NC	27604		saction ID : SE.44783 of Disbursement or Obligation
Purpose of Expenditure Canvassing (Estimate reported 10/7. This is actual a next period)	and paid in	Category/ Type 004		M M / D D / Y Y Y Y
Name of Federal Candidate:		Support	Office Sough	ht: House District: 00
BARNES, MANDELA, , ,		X Oppose	Presid	\\\\\
Calendar Year-To-Date Per Election for Office Sought	7 1 7	11384.36	Disbursemer 2022	nt For: Primary
Full Name of Payee Headway Workforce Solutions Inc. Mailing Address		 Memo	_	of Public Distribution/Dissemination
3100 Smoketree Ct. Suite 900			Amou	ınt
City	State	Zip Code		2000.00
Raleigh	NC	27604		saction ID : SE.44784 of Disbursement or Obligation
Purpose of Expenditure Canvassing (Estimate reported 10/7. This is actual next period)	and paid in	Category/ Type 004		M M / D D / Y Y Y Y
Name of Federal Candidate:		x Support	Office Sough	ht: House District: 00
JOHNSON, RON HAROLD MR., , ,		Oppose	Presid	lent 🗶 Senate State: WI
Calendar Year-To-Date Per Election for Office Sought	7 1 7	11384.36	Disbursemer 2022	nt For: Primary General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditure			· [:	0.00
(c) TOTAL Independent Expenditures			· [
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized	•		•
Gross, Jennifer, , ,	Electronically Fil	led] Date	10	27 2022

TEMIZED INDEPENDENT EXPENDITURES				PAGE 157 OF 182
				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			1	FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	rt filed on	M / D D / Y Y Y Y Y
Full Name of Payee Headway Workforce Solutions Inc.		X Memo	M	Public Distribution/Dissemination O O O O O O O O O O O O O
Mailing Address 3100 Smoketree Ct.				00 2022
Suite 900			Amount	t
City	State	Zip Code		125.00
Raleigh	NC	27604		ction ID : SE.44787 Disbursement or Obligation
Purpose of Expenditure Mileage (Estimate reported 10/7. This is actual and period)	paid in next	Category/ Type 004	M	M / D D / Y Y Y Y
Name of Federal Candidate:		✗ Support	Office Sought:	House District: 00
JOHNSON, RON HAROLD MR., , ,		Oppose	Presider	\\\\\
Calendar Year-To-Date Per Election for Office Sought	7 1 7	11384.36	Disbursement 2022 Otl	For: Primary X General ner (specify) ▶
Full Name of Payee Headway Workforce Solutions Inc. Mailing Address 3100 Smoketree Ct.		∡ Memo	M	Public Distribution/Dissemination
Suite 900				
City Raleigh	State NC	Zip Code 27604		125.00 action ID : SE.44788 Disbursement or Obligation
Purpose of Expenditure Mileage (Estimate reported 10/7. This is actual and period)	I paid in next	Category/ Type 004		M / D D / Y Y Y Y
Name of Federal Candidate:		Support	Office Sought:	House District: 00
BARNES, MANDELA, , ,		X Oppose	Presider	nt 🗶 Senate State: WI
Calendar Year-To-Date Per Election for Office Sought	7	11384.36	Disbursement 2022 Ott	For: Primary X General mer (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditure (c) TOTAL Independent Expenditures	res			0.00
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ent expenditures ate or authorized	reported herein were	not made in co	•
Gross, Jennifer, , ,	(Electronically Fil	led1 -	M M /	D D / Y Y Y Y Y Y Y 2022
Oliverations	Titomounty I'll	_ Date	10	27 2022

TEMIZED INDEPENDENT EXPENDITURES				PAGE 158 OF 182
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
WOMEN SPEAK OUT PAC				FEC IDENTIFICATION NUMBER ▼
WOWLIN OF EARL OOF TAKE				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repor	t filed on	M / D D / Y Y Y Y
Full Name of Payee Headway Workforce Solutions Inc.		🗶 Memo I	M	of Public Distribution/Dissemination
Mailing Address 3100 Smoketree Ct.				10 03 2022
Suite 900			Amour	nt
City	State	Zip Code	$-\Gamma$	300.00
Raleigh	NC	27604		action ID : SE.44794
Purpose of Expenditure Mileage (Estimate reported 10/7. This is actual and period)	paid in next	Category/ Type 004		of Disbursement or Obligation
Name of Federal Candidate:			000	t: Nauga Diatriat: 00
MASTERS, BLAKE, , ,		✗ Support	Office Sough	t
WWOTERO, BETTLE, , ,		Oppose	Preside	ent state.
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	1034160.27	Disbursement 2022 O	t For: Primary ★ General ther (specify) ▶
Full Name of Payee Headway Workforce Solutions Inc. Mailing Address 3100 Smoketree Ct.		X Memo I	tem Date o	of Public Distribution/Dissemination
Suite 900			Amour	nt
City	State	Zip Code	$-\Gamma$	300.00
Raleigh	NC	27604	Trans	saction ID : SE.44795 of Disbursement or Obligation
Purpose of Expenditure Mileage (Estimate reported 10/7. This is actual and period)	paid in next	Category/ Type 004	M	"M / D "D / Y "Y "Y "Y
Name of Federal Candidate:		Support	Office Sough	t: House District:00
KELLY, MARK, , ,		x Oppose	Preside	
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	1034160.27	Disbursemen 2022 O	t For:
(a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditure			..	0.00
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized			
Gross, Jennifer, , ,	Electronically Fil	ded] Date	M M /	27 2022

TEMIZED INDEPENDENT EXPENDITURES				PAGE 159 OF 182
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
WOMEN SPEAK OUT PAC				IDENTIFICATION NUMBER ▼
			С	C00530766
Check if 24-hour report 48-hour report	New rep	ort Amends repor	filed on	/ D = D / Y = Y = Y
Full Name of Payee Headway Workforce Solutions Inc.		🗶 Memo I	em Date of Pu	blic Distribution/Dissemination / DDD / YDD Y YDY YDY YDD YDD YDD YDD YD
Mailing Address 3100 Smoketree Ct.				2022
Suite 900			Amount	
City	State	Zip Code		200.00
Raleigh	NC	27604		on ID : SE.44798 Sursement or Obligation
Purpose of Expenditure Mileage (Estimate reported 10/7. This is actual and period)	paid in next	Category/ Type 004	M = M	/ D D / Y Y Y Y
Name of Federal Candidate:		✗ Support	Office Sought:	House District: 00
RUBIO, MARCO, , ,		Oppose	President	Senate State: FL
Calendar Year-To-Date Per Election for Office Sought	7 7	36093.18	Disbursement For 2022 Other	: Primary X General (specify) ▶
Full Name of Payee Headway Workforce Solutions Inc. Mailing Address		⋉ Memo I	Date of Pu	blic Distribution/Dissemination
3100 Smoketree Ct. Suite 900			Amount	
City	State	Zip Code		200.00
Raleigh	NC	27604		on ID: SE.44799 sbursement or Obligation
Purpose of Expenditure Mileage (Estimate reported 10/7. This is actualand period)	paid iin next	Category/ Type 004	M = M	/ D D / Y Y Y Y
Name of Federal Candidate:		Support	Office Sought:	House District: 00
DEMINGS, VAL, , ,		x Oppose	President	Senate State: FL
Calendar Year-To-Date Per Election for Office Sought	7 1 7	36093.18	Disbursement For 2022 Other	: Primary X General (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditure				0.00
(c) TOTAL Independent Expenditures			>	, , , , , , , , ,
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized	•		· ·
Gross, Jennifer, , ,	Electronically Fil	ded] Date	M M / D 27	2022

TEMIZED INDEPENDENT EXPENDITURES				PAGE 160 OF 182 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo		M / D D / Y Y Y Y
Full Name of Payee		✗ Memo	Item Date	of Public Distribution/Dissemination
Headway Workforce Solutions Inc.				10 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 3100 Smoketree Ct.				
Suite 900			Amou	nt
City	State	Zip Code		200.00
Raleigh	NC	27604	Trans Date	saction ID : SE.44802 of Disbursement or Obligation
Purpose of Expenditure Mileage (Estimate reported 10/7. This is actual and period)	paid in next	Category/ Type 004		/ M M / D D / Y Y Y Y
Name of Federal Candidate:		X Support	Office Sough	nt: House District: 00
WALKER, HERSCHEL MR., , ,		Oppose	Presid	ent Senate State: GA
Calendar Year-To-Date		1	Disbursemer	nt For: Primary 🗶 General
Per Election for Office Sought	7	21470.92	2022 c	Other (specify) ▶
Full Name of Payee		✗ Memo	Item Date	of Public Distribution/Dissemination
Headway Workforce Solutions Inc.			[10 05 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 3100 Smoketree Ct.				10 00 2022
Suite 900			Amou	nt
City	State	Zip Code		200.00
Raleigh	NC	27604	I	saction ID : SE.44803 of Disbursement or Obligation
Purpose of Expenditure Mileage (Estimate reported 10/7. This is actual and period)	paid in next	Category/ Type 004		A M / D D / Y Y Y Y
Name of Federal Candidate:		Support	Office Sough	nt: House District:00
WARNOCK, RAPHAEL, , ,		x Oppose	Presid	ent Senate State: GA
Calendar Year-To-Date		21470.92	Disbursemer	nt For: Primary 🗶 General
Per Election for Office Sought	7 7	21470.92	²⁰²²	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures			. [0.00
			_	
(b) SUBTOTAL of Unitemized Independent Expenditure	es		•	
(a) TOTAL landers and each Four and library				
(c) TOTAL Independent Expenditures			-	
Under penalty of perjury I certify that the independer with, or at the request or suggestion of, any candidate party committee) any political party committee or its a	te or authorized			
Gross, Jennifer, , ,	Electronically Fil	ed1 –	M = M /	27 2022
Signature		Date	10	27 2022

TEMIZED INDEPENDENT EXPENDITURES				PAGE 161 OF 182 FOR LINE 24 OF FORM 3X	
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼	
WOMEN SPEAK OUT PAC	WOMEN SPEAK OUT PAC				
				C C00530766	
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y	
Full Name of Payee Headway Workforce Solutions Inc.		X Memo	Item D	ate of Public Distribution/Dissemination	
Mailing Address 3100 Smoketree Ct.			Α	10 05 2022 mount	
Suite 900		1			
City	State	Zip Code		600.00	
Raleigh	NC	27604	I	ransaction ID : SE.44806 ate of Disbursement or Obligation	
Purpose of Expenditure Mileage (Estimate reported 10/7. This is actual and period)	paid in next	Category/ Type 004		M = M / D = D / Y = Y = Y	
Name of Federal Candidate:		X Support	Office S	ought: House District:00	
BUDD, THEODORE P, , ,		Oppose	Pr	resident Senate State: NC	
Calendar Year-To-Date			Disburse	ement For: Primary X General	
Per Election for Office Sought		56573.26	2022	Other (specify) ▶	
Full Name of Payee		∡ Memo	Itom D	ate of Public Distribution/Dissemination	
Headway Workforce Solutions Inc.		A Wello	item 5	10 05 / Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y	
Mailing Address 3100 Smoketree Ct.					
Suite 900			A	mount	
City	State	Zip Code		600.00	
Raleigh	NC	27604		Transaction ID : SE.44807 ate of Disbursement or Obligation	
Purpose of Expenditure Mileage (Estimate reported 10.7. This is actual and period)	d paid in next	Category/ Type 004		M M / D D / Y Y Y Y	
Name of Federal Candidate:		Support	Office S	ought: House District: 00	
BEASLEY, CHERI, , ,		x Oppose	Pr	resident Senate State: NC	
Calendar Year-To-Date			Disburse	ement For: Primary X General	
Per Election for Office Sought	7 7	56573.26	2022	Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures			• [0.00	
(b) SUBTOTAL of Unitemized Independent Expenditu	res				
(c) TOTAL Independent Expenditures			•		
Under penalty of perjury I certify that the independed with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized				
Gross, Jennifer, , ,	(Electronic II 72	lod1	M = M	/ D D / Y Y Y Y Y	
Signature	[Electronically Fil	Date Date	e 10	27 2022	

 $Gross, Jennifer, \, , \, ,$

Signature

S

SCHEDULE E (FEC Form 3X) FEMIZED INDEPENDENT EXPENDITURES				PAGE 162 OF 182
				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				C C00530766
Check if 24-hour report 48-hour report	New rep	port Amends repo	ort filed on	M / D D / Y Y Y Y
Full Name of Payee Headway Workforce Solutions Inc.		⋉ Memo	М	f Public Distribution/Dissemination
Mailing Address 3100 Smoketree Ct.			Amoun	
Suite 900			Allioui	
City	State	Zip Code		75.00
Raleigh	NC	27604		action ID : SE.44809 f Disbursement or Obligation
Purpose of Expenditure Mileage (Estimate reported 10/7. This is actual and next period)	reported in	Category/ Type 004		M / D D / Y D Y D
Name of Federal Candidate:		✗ Support	Office Sought	t: House District: 00
LAXALT, ADAM, , ,		Oppose	Preside	NIV/
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	11836.41	Disbursement 2022 Ot	t For: Primary X General ther (specify) ▶
Full Name of Payee Headway Workforce Solutions Inc.		∡ Memo	М	f Public Distribution/Dissemination
Mailing Address 3100 Smoketree Ct.			Amoun	nt
Suite 900	T-: :	T =		75.00
City Raleigh	State	Zip Code 27604		75.00 action ID : SE.44810
Purpose of Expenditure Mileage (Estimate reported 10/7. This is actual and period	d paid in next	Category/ Type 004	М	f Disbursement or Obligation
Name of Federal Candidate:		Support	Office Sought	t: House District: 00
CORTEZ MASTO, CATHERINE, , ,		x Oppose	Preside	
Calendar Year-To-Date Per Election for Office Sought	7 7	11836.41	Disbursement 2022 Ot	ther (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	s		· [0.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•	
(c) TOTAL Independent Expenditures			•	,,,,,
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorize			

[Electronically Filed]

2022

27

10

Date

TEMIZED INDEPENDENT EXPENDITURES				PAGE 163 OF 182
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
WOMEN SPEAK OUT PAC				FEC IDENTIFICATION NUMBER ▼
				C C00530766
Check if 24-hour report 48-hour report	New rep	ort Amends repo	rt filed on	W = M / D = D / Y = Y = Y
Full Name of Payee Headway Workforce Solutions Inc.		✗ Memo	Item Date	of Public Distribution/Dissemination
Mailing Address 3100 Smoketree Ct.				10 00 2022
Suite 900			Amo	unt
City	State	Zip Code	-	350.00
Raleigh	NC	27604		saction ID : SE.44813 of Disbursement or Obligation
Purpose of Expenditure Mileage (Estimate reported 10/7. This is actual and period)	paid in next	Category/ Type 004		M M / D D / Y Y Y Y
Name of Federal Candidate:		X Support	Office Soug	ht: House District: 00
OZ, MEHMET DR, , ,		Oppose	Presid	
Calendar Year-To-Date Per Election for Office Sought	7 1 7	41567.90	Disburseme	ent For: Primary
Full Name of Payee Headway Workforce Solutions Inc. Mailing Address		∡ Memo	Item Date	of Public Distribution/Dissemination
3100 Smoketree Ct. Suite 900			Amo	unt
City	State	Zip Code		350.00
Raleigh	NC	27604		of Disbursement or Obligation
Purpose of Expenditure Mileage (Estimate reported 10/7. This is actual and period)	d paid in next	Category/ Type 004		M = M / D = D / Y = Y = Y
Name of Federal Candidate:		Support	Office Soug	ht: House District: 00
FETTERMAN, JOHN KARL, , ,		x Oppose	Presid	dent Senate State: PA
Calendar Year-To-Date Per Election for Office Sought	7 1 7	41567.90	Disburseme	ont For: ☐ Primary 🗶 General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditure			• [.	0.00
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized	•		•
Gross, Jennifer, , ,	[Electronically Fil	<i>led]</i> Date	10 /	27 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

TEMIZED INDEPENDENT EXPENDITURES				PAGE 164 OF 182
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
WOMEN SPEAK OUT PAC				FEC IDENTIFICATION NUMBER ▼
7,0,1,2,1,0,1,1,1,0,0,1,7,1,0				C C00530766
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on	/ M / D D / Y Y Y Y
Full Name of Payee Headway Workforce Solutions Inc.		☐ Memo	_	of Public Distribution/Dissemination
Mailing Address	[10 01 7 2022		
3100 Smoketree Ct. Suite 900			Amou	unt
City	State	Zip Code	— I I I	386.03
Raleigh	NC	27604		saction ID : SE.43212
Purpose of Expenditure Mileage (Estimate Reported 10/3. This is Actual)	<u> </u>	Category/ Type 004		of Disbursement or Obligation
Name of Federal Candidate:		✗ Support	Office Soug	ht: House District: 00
MASTERS, BLAKE, , ,		Oppose	Presid	
Calendar Year-To-Date			Disburseme	
Per Election for Office Sought	, , ,	1034546.30	2022	Other (specify)
Full Name of Payee Headway Workforce Solutions Inc.		☐ Memo	Item Date	of Public Distribution/Dissemination
Mailing Address 3100 Smoketree Ct.			Amou	unt
Suite 900		1		
City Raleigh	State NC	Zip Code 27604	Tran	386.03 saction ID : SE.43213 of Disbursement or Obligation
Purpose of Expenditure Mileage (Estimate Reported 10/3. This is Actual)		Category/ Type 004		10 09 / 2022
Name of Federal Candidate:		Support	Office Soug	ht: House District: 00
KELLY, MARK, , ,		x Oppose	Presid	
Calendar Year-To-Date Per Election for Office Sought		1034932.33	Disbursemer	
				Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures			•	772.06
(b) SUBTOTAL of Unitemized Independent Expenditure	res		•	
(c) TOTAL Independent Expenditures			•	7
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gross, Jennifer, , ,	Electronically Fil	[ed]	M = M /	27 2022
Cignoturo		Date	9 10	21 2022

TEMIZED INDEPENDENT EXPENDITURES			PAGE 165 OF 182 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC			C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on M M / D D / Y Y Y Y
Full Name of Payee Headway Workforce Solutions Inc.		☐ Memo	M M / D D / Y Y Y Y
Mailing Address 3100 Smoketree Ct.			10 01 2022 Amount
Suite 900		T =	
City	State	Zip Code 27604	6900.82 Transaction ID : SE.43214
Raleigh	NC	27604	Date of Disbursement or Obligation
Purpose of Expenditure Canvassing (Estimate reported 10/3/22. This is actu	al)	Category/ Type 004	4 10 09 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		✗ Support	Office Sought: House District: 00
MASTERS, BLAKE, , ,		Oppose	President Senate State: AZ
Calendar Year-To-Date			Disbursement For: Primary
Per Election for Office Sought		1041833.15	2022 Other (specify) ▶
Full Name of Payee		☐ Memo	
Headway Workforce Solutions Inc.		□ Memo	10 01 2022
Mailing Address 3100 Smoketree Ct.			
Suite 900			Amount
City	State	Zip Code	6900.82
Raleigh	NC	27604	Transaction ID : SE.43215 Date of Disbursement or Obligation
Purpose of Expenditure Canvassing (Estimate reported 10/3/22. This is act	ual)	Category/ Type 004	M M / D D / Y Y Y
Name of Federal Candidate:		Support	Office Sought: House District: 00
KELLY, MARK, , ,		Cupport Oppose	President X Senate State: AZ
		W 044000	
Calendar Year-To-Date Per Election for Office Sought	1 1	1048733.97	Disbursement For: ☐ Primary ✗ General 2022 ☐ Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			. ▶ 13801.64
(b) SUBTOTAL of Unitemized Independent Expenditure	es		•
(c) TOTAL Independent Expenditures			·
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized		
Gross, Jennifer, , ,	Electronically Fil	od1	M M / D D / Y Y Y Y
Signature	ълсы описану F Ш	Date	e 10 27 2022

TEMIZED INDEPENDENT EXPENDITURES				PAGE 166 OF 182
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
WOMEN SPEAK OUT PAC				FEC IDENTIFICATION NUMBER ▼
				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends report	filed on	M / D D / Y Y Y Y
Full Name of Payee Headway Workforce Solutions Inc.		☐ Memo It	em Date o	of Public Distribution/Dissemination
Mailing Address 3100 Smoketree Ct.				<u> </u>
Suite 900			Amour	nt
City	State	Zip Code	- II :	7602.28
Raleigh	NC	27604		action ID : SE.43223 If Disbursement or Obligation
Purpose of Expenditure Canvassing (Estimate reported 10/3/22. This is actu	ıal)	Category/ Type 004		10 09 2022
Name of Federal Candidate:		X Support	Office Sough	t: House District:00
RUBIO, MARCO, , ,		Oppose	Preside	
Calendar Year-To-Date			Disbursemen	t For: Primary Seneral
Per Election for Office Sought	<i>_</i>	43695.46	²⁰²²	ther (specify) ▶
Full Name of Payee Headway Workforce Solutions Inc.		☐ Memo It	_	of Public Distribution/Dissemination
Mailing Address 3100 Smoketree Ct.			_ L	10 01 2022
Suite 900			Amour	nt
City	State	Zip Code	— F.	7602.28
Raleigh	NC	27604		saction ID : SE.43224 of Disbursement or Obligation
Purpose of Expenditure Canvassing (Estimate reported 10/3/22. This is ac	tual)	Category/ Type 004		10 09 7 2022
Name of Federal Candidate:		Support	Office Sough	t: House District:00
DEMINGS, VAL, , ,		x Oppose	Preside	ent Senate State: FL
Calendar Year-To-Date		51297.74	Disbursemen	t For: Primary 🗶 General
Per Election for Office Sought	7 7	0.20	O	ther (specify) >
(a) SUBTOTAL of Itemized Independent Expenditures	;		· [15204.56
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidaparty committee) any political party committee or its	ate or authorized	•		•
Gross, Jennifer, , ,	[Electronically Fil	[ed]	M = M /	27 / Y T Y T Y T Y T Y T Y T Y T Y T Y T Y
Cianatura		Date	10	21 2022

TEMIZED INDEPENDENT EXPENDITURES			PAGE 167 OF 182
			FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC			FEC IDENTIFICATION NUMBER ▼
WOWEN SPEAK OUT PAC			C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends report	filed on Man / Dad / Yayayay
Full Name of Payee Headway Workforce Solutions Inc.		☐ Memo It	Date of Public Distribution/Dissemination Date of Public Distribution/Dissemination 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 3100 Smoketree Ct.			
Suite 900			Amount
City	State	Zip Code	397.28
Raleigh	NC	27604	Transaction ID : SE.43225 Date of Disbursement or Obligation
Purpose of Expenditure Mileage (Estimate Reported 10/3. This is Actual)		Category/ Type 004	10 / 09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		X Support	Office Sought: House District: 00
RUBIO, MARCO, , ,		Oppose	President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7		Disbursement For: Primary General 2022 Other (specify) ▶
Full Name of Payee Headway Workforce Solutions Inc. Mailing Address 3100 Smoketree Ct. Suite 900		☐ Memo It	Date of Public Distribution/Dissemination M M M / D D / Y Y Y Y Y Amount
City	State	Zip Code	397.28
Raleigh	NC	27604	Transaction ID : SE.43226 Date of Disbursement or Obligation
Purpose of Expenditure Mileage (Estimate Reported 10/3. This is Actual)		Category/ Type 004	10
Name of Federal Candidate:		Support	Office Sought: House District: 00
DEMINGS, VAL, , ,		x Oppose	President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought	7	E0000 00	Disbursement For: Primary
(a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditure			794.56
(c) TOTAL Independent Expenditures			•
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized	-	·
Gross, Jennifer, , ,	Electronically Fil	ed] Date	10 27 2022

				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				
				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends rep	ort filed	on M M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	o Item	Date of Public Distribution/Dissemination
Headway Workforce Solutions Inc.				10 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 3100 Smoketree Ct.				Amount
Suite 900				Amount
City	State	Zip Code		282.83
Raleigh	NC	27604		Transaction ID: SE.43233 Date of Disbursement or Obligation
Purpose of Expenditure Mileage (Estimate Reported 10/3. This is Actual)		Category/ Type 00	04	10 09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		✗ Support	Office	e Sought: House District: 00
WALKER, HERSCHEL MR., , ,		Oppose		President State: GA
Calendar Year-To-Date		146753.75		ursement For: Primary X General
Per Election for Office Sought	7 1 7	140753.75	2022	Other (specify) ▶
Full Name of Payee		☐ Memo	o Item	Date of Public Distribution/Dissemination
Headway Workforce Solutions Inc.				10 01 / Y Y Y Y Y Y
Mailing Address 3100 Smoketree Ct.				
Suite 900				Amount
City	State	Zip Code		282.83
Raleigh	NC	27604		Transaction ID : SE.43234 Date of Disbursement or Obligation
Purpose of Expenditure Mileage (Estimate Reported 10/3. This is Actual)		Category/ Type 00	4	10 09 / 2022
Name of Federal Candidate:		Support	Office	e Sought: House District: 00
WARNOCK, RAPHAEL, , ,		x Oppose		President Senate State: GA
Calendar Year-To-Date		i minani na i	Disbu	ursement For: Primary X General
Per Election for Office Sought	7 7	147036.58	2022	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			▶	565.66
(b) SUBTOTAL of Unitemized Independent Expenditure	res		▶	
(c) TOTAL Independent Expenditures				
(b) TO TAL Independent Experientalises				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gross, Jennifer, , ,	Electronically Fil	ed] –	M	0 27 2022
Signature		Da Da	te 1	0 27 2022

TEMIZED INDEPENDENT EXPENDITURES			<u> </u>	AGE 169 OF 182
NAME OF COMMITTEE (In Full)				OR LINE 24 OF FORM 3X
WOMEN SPEAK OUT PAC				NTIFICATION NUMBER ▼
			C	00530766
Check if 24-hour report 48-hour report	New repo	ort Amends report	filed on M M /	D D / Y Y Y Y Y
Full Name of Payee Headway Workforce Solutions Inc.		☐ Memo It	M = M /	Distribution/Dissemination
Mailing Address 3100 Smoketree Ct.			10	01 2022
Suite 900			Amount	
City	State	Zip Code		12500.00
Raleigh	NC	27604	Transaction ID	
Purpose of Expenditure Canvassing (Estimate Reported 10/3 This is Actual)		Category/ Type 004	Date of Disburse	ement or Obligation 09 2022
Name of Federal Candidate:				Hausa Diatriat: 00
WALKER, HERSCHEL MR., , ,		Support		nouse District.
WALKER, HERSOFIEE WIK., , ,		Oppose		Senate State.
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	159536.58	Disbursement For: 022 Other (spec	Primary ✗ General
Full Name of Payee Headway Workforce Solutions Inc.		☐ Memo It	Date of Public D	Distribution/Dissemination
Mailing Address 3100 Smoketree Ct. Suite 900			Amount	
City	State	Zip Code		12500.00
Raleigh	NC	27604	Transaction ID	
Purpose of Expenditure Canvassing (Estimate Reported 10/3. This is Actua	al)	Category/ Type 004	10 June 1	09 / 2022
Name of Federal Candidate:		Support	Office Sought:	House District:00
WARNOCK, RAPHAEL, , ,		x Oppose		Senate State: GA
Calendar Year-To-Date Per Election for Office Sought	A A	172036.58	Disbursement For: 2022 Other (spec	Primary General
	,		Other (spec	
(a) SUBTOTAL of Itemized Independent Expenditures			>	25000.00
(b) SUBTOTAL of Unitemized Independent Expenditure	es		>	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized			
Gross, Jennifer, , ,	Electronically Fil	[ed] Date	10 27	2022

TEMIZED INDEPENDENT EXPENDITURES				PAGE 170 OF 182
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
WOMEN SPEAK OUT PAC			FEC	IDENTIFICATION NUMBER ▼
WOWLING LARGOTTAG			C	C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repor	t filed on	/ D D / Y Y Y Y
Full Name of Payee Headway Workforce Solutions Inc.		☐ Memo I	M = M	olic Distribution/Dissemination
Mailing Address 3100 Smoketree Ct.				01 2022
Suite 900			Amount	
City	State	Zip Code		12109.99
Raleigh	NC	27604		n ID : SE.43242 bursement or Obligation
Purpose of Expenditure Canvassing (Estimate Reported 10/3. This is Actual)		Category/ Type 004	10	09 / 2022
Name of Federal Candidate:		X Support	Office Sought:	House District:00
BUDD, THEODORE P, , ,		Oppose	President	Senate State: NC
Colondon Vana Ta Data			Disbursement For:	
Calendar Year-To-Date Per Election for Office Sought		68683.25	2022 —	(specify) ▶
Full Name of Payee Headway Workforce Solutions Inc.		☐ Memo I	Date of Pub	olic Distribution/Dissemination
Mailing Address			10	01 2022
3100 Smoketree Ct.			Amount	
Suite 900 City	State	Zip Code		12110.00
Raleigh	NC	27604	Transactio	on ID : SE.43243 bursement or Obligation
Purpose of Expenditure Canvassing (Estimate Reported 10/3. This is Actua	1)	Category/ Type 004	10 ^M	09 / 2022
Name of Federal Candidate:		Support	Office Sought:	House District:00
BEASLEY, CHERI, , ,		x Oppose	President	Senate State: NC
Calendar Year-To-Date			Disbursement For:	Primary X General
Per Election for Office Sought	7 7	80793.25	2022	(specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				24219.99
(4, 002.00.11.20.11				7
(b) SUBTOTAL of Unitemized Independent Expenditure	es		>	
(c) TOTAL Independent Expenditures			-	7
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
Gross, Jennifer, , ,	Electronically Fil	edl –	M M / D 27	D / Y Y Y Y Y Y Y 2022
	I	Date	10 27	2022

TEMIZED INDEPENDENT EXPENDITURES			PAGE 171 OF 182
NAME OF COMMITTEE (In Full)			FOR LINE 24 OF FORM 3X
WOMEN SPEAK OUT PAC			FEC IDENTIFICATION NUMBER ▼
WOWLING LAKOUTTAC			C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends report	t filed on M M / D D / Y Y Y Y
Full Name of Payee Headway Workforce Solutions Inc.		☐ Memo II	M M / D D / Y Y Y
Mailing Address 3100 Smoketree Ct.			10 01 2022
Suite 900			Amount
City	State	Zip Code	1376.17
Raleigh	NC	27604	Transaction ID : SE.43244 Date of Disbursement or Obligation
Purpose of Expenditure Mileage (Estimate Reported 10/3. This is Actual)		Category/ Type 004	10 09 2022
Name of Federal Candidate:		X Support	Office Sought: House District: 00
BUDD, THEODORE P, , ,		Oppose	President X Senate State: NC
Calendar Year-To-Date			Disbursement For: Primary
Per Election for Office Sought		82169.42	2022 Other (specify) ▶
Full Name of Payee Headway Workforce Solutions Inc.		☐ Memo It	tem Date of Public Distribution/Dissemination
Mailing Address			10 01 2022
3100 Smoketree Ct.			Amount
Suite 900	State	Zin Codo	1376.10
City Raleigh		Zip Code	Transaction ID : SE.43245
	NC	27604	Date of Disbursement or Obligation
Purpose of Expenditure Mileage (Estimate Reported 10/3. This is Actual)		Category/ Type 004	10 09 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sought: House District: 00
BEASLEY, CHERI, , ,		x Oppose	President X Senate State: NC
Calendar Year-To-Date			Disbursement For: Primary X General
Per Election for Office Sought	7-1-1-7-	83545.52	2022
(a) SUBTOTAL of Itemized Independent Expenditures			2752.27
(b) SUBTOTAL of Unitemized Independent Expenditure	es		>
(c) TOTAL Independent Expenditures			·
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized		
Gross, Jennifer, , ,	Electronically Fil	led1 -	M M / D D / Y Y Y Y Y
·	<u> гасионици</u> у Ги	Date	10 27 2022

TEMIZED INDEPENDENT EXPENDITURES				PAGE 172 OF 182
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
WOMEN SPEAK OUT PAC				FEC IDENTIFICATION NUMBER ▼
7,0,1,2,1,0,1,1,1,0,0,1,7,1,0				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	rt filed on	M M / D D / Y Y Y Y
Full Name of Payee Headway Workforce Solutions Inc.		☐ Memo		of Public Distribution/Dissemination
Mailing Address 3100 Smoketree Ct.			L	10 01 2022
Suite 900			Amou	unt
City	State	Zip Code	$ \Gamma$	75.68
Raleigh	NC	27604		saction ID : SE.43251 of Disbursement or Obligation
Purpose of Expenditure Mileage (Estimate Reported 10/3. This is Actual)		Category/ Type 004		10 09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		✗ Support	Office Sough	ht: House District: 00
LAXALT, ADAM, , ,		Oppose	Presid	NIV/
Calendar Year-To-Date			Disbursemer	
Per Election for Office Sought		11912.09	2022	Other (specify)
Full Name of Payee Headway Workforce Solutions Inc.		☐ Memo	Item Date	of Public Distribution/Dissemination
Mailing Address 3100 Smoketree Ct.			Amou	
Suite 900			Amou	41 IL
City Raleigh	State NC	Zip Code 27604	Tran	75.68 saction ID : SE.43252
Purpose of Expenditure Mileage (Estimate Reported 10/3. This is Actual)		Category/ Type 004		of Disbursement or Obligation M M M O9 2022
Name of Federal Candidate:		Support	Office Sough	ht: House District: 00
CORTEZ MASTO, CATHERINE, , ,		X Oppose	Presid	NIV/
Calendar Year-To-Date Per Election for Office Sought		11987.77	Disbursemer	
Ter Election for Office Gought				Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			•	151.36
(b) SUBTOTAL of Unitemized Independent Expenditure	res		.	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gross, Jennifer, , ,	[Electronically Fil	led] Date	M M /	27 / Y = Y = Y = Y = Y = Y
Cianatura			. 10	

SCHEDULE E (FEC Form 3X)

TEMIZED INDEPENDENT EXPENDITURES				PAGE 173 OF 182 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				
WOMEN SPEAK OUT PAC				FEC IDENTIFICATION NUMBER ▼
				C C00530766
Check if 24-hour report 48-hour report	New rep	ort Amends repo	rt filed on	M M / D D / Y Y Y Y
Full Name of Payee Headway Workforce Solutions Inc.		☐ Memo	Item Date	of Public Distribution/Dissemination
Mailing Address 3100 Smoketree Ct.				10 01 2022
Suite 900			Amo	unt
City	State	Zip Code	-	984.08
Raleigh	NC	27604		saction ID : SE.43253 of Disbursement or Obligation
Purpose of Expenditure Canvassing (Estimate Reported 10/3. This is Actual)	Category/ Type 004	_	M M / 09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		X Support	Office Soug	ght: House District: 00
LAXALT, ADAM, , ,		Oppose	Presi	NIV
Calendar Year-To-Date Per Election for Office Sought	7 1 7	12971.85	Disburseme	ent For: Primary
Full Name of Payee Headway Workforce Solutions Inc.		☐ Memo	Item Date	of Public Distribution/Dissemination
Mailing Address 3100 Smoketree Ct. Suite 900			Amo	unt
City	State	Zip Code		984.08
Raleigh	NC	27604	I	nsaction ID : SE.43254 of Disbursement or Obligation
Purpose of Expenditure Canvassing (Estimate Reported 10/3. This is Actual	al)	Category/ Type 004		M M / 09 / Y Y Y Y Y Y 100 / 2022
Name of Federal Candidate:		Support	Office Sou	ht: House District: 00
CORTEZ MASTO, CATHERINE, , ,		X Oppose	Presi	NIV
Calendar Year-To-Date Per Election for Office Sought	7 7	13955.93	Disburseme	ent For: Primary General Other (specify)
(a) SUBTOTAL of Uniterprized Independent Expenditures				1968.16
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized	•		•
Gross, Jennifer, , ,	[Electronically Fi	<i>led]</i> Date	M M /	27 2022

Date

TEMIZED INDEPENDENT EXPENDITURES			PAGE 174 OF 182
NAME OF COMMITTEE (In Full)			FOR LINE 24 OF FORM 3X
WOMEN SPEAK OUT PAC			FEC IDENTIFICATION NUMBER ▼
			C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends report fil	led on Man / Dad / Yayayay
Full Name of Payee Headway Workforce Solutions Inc.		☐ Memo Item	Date of Public Distribution/Dissemination
Mailing Address 3100 Smoketree Ct.			
Suite 900			Amount
City	State	Zip Code	9230.14
Raleigh	NC	27604	Transaction ID : SE.43260 Date of Disbursement or Obligation
Purpose of Expenditure Canvassing (Estimate Reported 10/3. This is Actual))	Category/ Type 004	10 09 7 2022
Name of Federal Candidate:		Support Of	ffice Sought: House District: 00
OZ, MEHMET DR, , ,		Oppose	President Senate State: PA
Calendar Year-To-Date Per Election for Office Sought	7	50798.04 Di 202	sbursement For: Primary
Full Name of Payee Headway Workforce Solutions Inc. Mailing Address		☐ Memo Item	Date of Public Distribution/Dissemination M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
3100 Smoketree Ct. Suite 900			Amount
City	State	Zip Code	9230.14
Raleigh	NC	27604	Transaction ID : SE.43261 Date of Disbursement or Obligation
Purpose of Expenditure Canvassing (Estimate Reported 10/3. This is Actua	(lk	Category/ Type 004	10 09 7 2022
Name of Federal Candidate:		Support Of	ffice Sought: House District: 00
FETTERMAN, JOHN KARL, , ,		X Oppose	President Senate State: PA
Calendar Year-To-Date Per Election for Office Sought	1	60000 40	sbursement For: ☐ Primary X General 22 ☐ Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures		······	. 18460.28
(b) SUBTOTAL of Unitemized Independent Expenditure	'es	·····	
(c) TOTAL Independent Expenditures		·····	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized		
Gross, Jennifer, , ,	Electronically File	ed] Date	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
		Date	

TEMIZED INDEPENDENT EXPENDITURES				PAGE 175 OF 182 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo		"M / D "D / Y "Y "Y "Y
Crieck ii 24-riodi report 40-riodi report	New Tepo	ort Amerius repo	It liled on	
Full Name of Payee Headway Workforce Solutions Inc.		☐ Memo		of Public Distribution/Dissemination
Mailing Address 3100 Smoketree Ct.			Amou	
Suite 900			Amou	
City	State	Zip Code		708.77
Raleigh	NC	27604	Trans Date	saction ID : SE.43262 of Disbursement or Obligation
Purpose of Expenditure Mileage (Estimate Reported 10/3. This is Actual)		Category/ Type 004		10 09 2022
Name of Federal Candidate:		Support	Office Sough	nt: House District: 00
OZ, MEHMET DR, , ,		Oppose	Presid	DA
Calendar Year-To-Date Per Election for Office Sought	, , ,	60736.95	Disbursemer 2022	nt For: Primary
Full Name of Payee		Memo		of Public Distribution/Dissemination
Headway Workforce Solutions Inc.				10 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 3100 Smoketree Ct.				
Suite 900			Amou	nt
City	State	Zip Code		1000.00
Raleigh	NC	27604	II	saction ID : SE.43263 of Disbursement or Obligation
Purpose of Expenditure Mileage (Estimate Reported 10/3. This is Actual)		Category/ Type 004		10 09 2022
Name of Federal Candidate:		Support	Office Sough	nt: House District:00
FETTERMAN, JOHN KARL, , ,		x Oppose	Presid	DA
Calendar Year-To-Date Per Election for Office Sought		61736.95	Disbursemer 2022	nt For: Primary X General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			•	1708.77
(b) SUBTOTAL of Unitemized Independent Expenditure	ae.			
(b) 30BTOTAL of Officernized independent Experioration				
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independer with, or at the request or suggestion of, any candidar party committee) any political party committee or its a	te or authorized			
Gross, Jennifer, , ,	Electronically File	ed1 -	M = M /	27 2022
Signature		Date	10	27 2022

TEMIZED INDEPENDENT EXPENDITURES				PAGE 176 OF 182
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
WOMEN SPEAK OUT PAC				FEC IDENTIFICATION NUMBER ▼
WOWLING LARGOTTAG				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	t filed on	M / D D / Y Y Y Y Y
Full Name of Payee Headway Workforce Solutions Inc.		☐ Memo	M	Public Distribution/Dissemination
Mailing Address 3100 Smoketree Ct.				01 2022
Suite 900			Amoun	t .
City	State	Zip Code	— I	202.88
Raleigh	NC	27604		ction ID : SE.43269 Disbursement or Obligation
Purpose of Expenditure Mileage (Estimate Reported 10/3. This is Actual)		Category/ Type 004	M	10 09 / 2022
Name of Federal Candidate:		✗ Support	Office Sought	: House District:00
JOHNSON, RON HAROLD MR., , ,		Oppose	Preside	
Calendar Year-To-Date			Disbursement	
Per Election for Office Sought		11587.24	2022 —	her (specify) ►
Full Name of Payee Headway Workforce Solutions Inc.		☐ Memo	M	Public Distribution/Dissemination
Mailing Address 3100 Smoketree Ct.				
Suite 900			Amoun	
City	State	Zip Code		202.88
Raleigh	NC	27604	Transa	action ID : SE.43270 Disbursement or Obligation
Purpose of Expenditure Mileage (Estimate Reported 10/3. This is Actual)		Category/ Type 004		10
Name of Federal Candidate:		Support	Office Sought	: House District:00
BARNES, MANDELA, , ,		x Oppose	Preside	\\\\\\
Calendar Year-To-Date Per Election for Office Sought	1	11790.12	Disbursement 2022	For: Primary X General her (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditure (c) TOTAL Independent Expenditures	es		>	405.76
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			he reporting entity is not a political
Gross, Jennifer, , ,	Electronically Fil	[ed] Date	10	27 2022

SCHEDULE E (FEC FOIII 3X)			
TEMIZED INDEPENDENT EXPENDITURES			PAGE 177 OF 182
NAME OF COMMITTEE (In Full)			FOR LINE 24 OF FORM 3X
WOMEN SPEAK OUT PAC			FEC IDENTIFICATION NUMBER ▼
			C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends report	t filed on M M / D D / Y Y Y Y Y
Full Name of Payee Headway Workforce Solutions Inc.		☐ Memo It	M M / D D / Y Y Y Y
Mailing Address 3100 Smoketree Ct.			
Suite 900			Amount
City	State	Zip Code	2558.21
Raleigh	NC	27604	Transaction ID : SE.43271 Date of Disbursement or Obligation
Purpose of Expenditure Canvassing (Estimate Reported 10/3. This is Actual))	Category/ Type 004	10 09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		✗ Support	Office Sought: House District: 00
JOHNSON, RON HAROLD MR., , ,		Oppose	President Senate State: WI
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: Primary General Other (specify) ▶
Full Name of Payee Headway Workforce Solutions Inc. Mailing Address 3100 Smoketree Ct.		☐ Memo It	Date of Public Distribution/Dissemination M 10
Suite 900			Amount
City	State	Zip Code	2558.21
Raleigh	NC	27604	Transaction ID : SE.43272 Date of Disbursement or Obligation
Purpose of Expenditure Canvassing (Estimate Reported 10/3. This is Actua	al)	Category/ Type 004	10 09 7 2022
Name of Federal Candidate:		Support	Office Sought: House District: 00
BARNES, MANDELA, , ,		x Oppose	President Senate State: WI
Calendar Year-To-Date Per Election for Office Sought	7	10000 E 4	Disbursement For: ☐ Primary X General 2022 ☐ Other (specify) ▶
(a) SUBTOTAL of Unitermized Independent Expenditures			5116.42
(b) SUBTOTAL of Unitemized Independent Expenditur	es		>
(c) TOTAL Independent Expenditures			>
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized	-	· · · · · · · · · · · · · · · · · · ·
Gross, Jennifer, , ,	[Electronically File	led] Data	10 27 2022
2:		Date	10 27 2022

TEMIZED INDEPENDENT EXPENDITURES				PAGE 178 OF 182
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
WOMEN SPEAK OUT PAC			F	EC IDENTIFICATION NUMBER ▼
WOWLING LARGOTTAG				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	rt filed on	M / D D / Y = Y = Y
Full Name of Payee Headway Workforce Solutions Inc.		☐ Memo	M	
Mailing Address 3100 Smoketree Ct.				05 2022
Suite 900			Amount	
City	State	Zip Code	$\dashv \sqcap$	4203.87
Raleigh	NC	27604		tion ID : SE.43305 Disbursement or Obligation
Purpose of Expenditure Canvassing (Estimate filed 10/7. This is Actual)		Category/ Type 004		M / D D / Y Y Y
Name of Federal Candidate:		✗ Support	Office Sought:	House District: 00
WALKER, HERSCHEL MR., , ,		Oppose	President	GA
Calendar Year-To-Date			Disbursement F	
Per Election for Office Sought		176240.45	2022	er (specify) ►
Full Name of Payee Headway Workforce Solutions Inc.		☐ Memo	tem Date of	
Mailing Address 3100 Smoketree Ct.			Amount	
Suite 900				
City Raleigh	State	Zip Code 27604	Transac	4203.87 ction ID : SE.43306
Purpose of Expenditure		Catagony		Disbursement or Obligation
Canvassing (Estimate filed 10/7/22. This is Actual)		Category/ Type 004	M 10	
Name of Federal Candidate:		Support	Office Sought:	House District:00
WARNOCK, RAPHAEL, , ,		Oppose	President	C^
Calendar Year-To-Date Per Election for Office Sought		180444.32	Disbursement F	_ , _
	1		Otne	er (specify)
(a) SUBTOTAL of Itemized Independent Expenditures				8407.74
(a) SOBTOTAL OF NOTIFICAL INDEPENDENT EXPONDITION	•••••			0401.14
(b) SUBTOTAL of Unitemized Independent Expenditure	es		•	, ,
(c) TOTAL Independent Expenditures			.	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
Gross, Jennifer, , ,	Electronically Fil	ed1 –	and the second second	27 2022
	I th	Date	10	27 2022

Gross, Jennifer, , ,

Signature

SO

CHEDULE E (FEC Form 3X) EMIZED INDEPENDENT EXPENDITURES				PAGE 179 OF 182
				FOR LINE 24 OF FORM 3X
AME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
VOMEN SPEAK OUT PAC				C C00530766
heck if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee Logan Circle Group, Inc.		☐ Memo	Item Date	e of Public Distribution/Dissemination
Mailing Address 455 Massachusetts Ave NW			Amo	
Suite 150-373 City	State	Zip Code		125000.00
Washington	DC	20001		Insaction ID : SE.43302 e of Disbursement or Obligation
Purpose of Expenditure Digital Ad Placement		Category/ Type 004		10 07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sou	ught: House District: 00
WARNOCK, RAPHAEL, , ,		X Oppose	Pres	sident Senate State: GA
Calendar Year-To-Date Per Election for Office Sought	7	146470.92	Disburseme	nent For: Primary
Full Name of Payee Logan Circle Group, Inc.		☐ Memo	Item Date	e of Public Distribution/Dissemination
Mailing Address 455 Massachusetts Ave NW			Amo	ount
Suite 150-373				
City	State	Zip Code		500000.00
Washington	DC	20001		ensaction ID : SE.43686 e of Disbursement or Obligation
Purpose of Expenditure Digital Ad Placement		Category/ Type 004		10 18 7 2022
Name of Federal Candidate:		Support	Office Sou	ught: House District: 00
WARNOCK, RAPHAEL, , ,		x Oppose	l —	sident Senate State: GA
Calendar Year-To-Date Per Election for Office Sought	7	682709.32	Disbursem 2022	nent For:
(a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditure				625000.00
.,			· L	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			

[Electronically Filed]

2022

27

10

Date

TEMIZED INDEPENDENT EXPENDITURES				PAGE 180 OF 182 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Da	ate of Public Distribution/Dissemination
RST Marketing		10 14 2022		
Mailing Address 1272 Corporate Park Drive	Ar	nount		
City	State	Zip Code	<u> —</u> Г	982.16
Forest	VA	24551		ransaction ID : SE.43376 ate of Disbursement or Obligation
Purpose of Expenditure Postage	se of Expenditure ge Category/ Type 004			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sc	ought: House District: 00
KELLY, MARK, , ,		X Oppose		esident State: AZ
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	1049716.13	Disburse 2022	ment For: Primary
Full Name of Payee		Memo	Item Da	ate of Public Distribution/Dissemination
RST Marketing				M M / D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y
Mailing Address 1272 Corporate Park Drive			Ar	nount
City	State	Zip Code	— г	982.15
Forest	VA	24551		ransaction ID : SE.43381 ate of Disbursement or Obligation
Purpose of Expenditure Postage		Category/ Type 004		10 11 2022
Name of Federal Candidate:		Support	Office Sc	ought: House District: 00
BEASLEY, CHERI, , ,		x Oppose	Pre	esident State: NC
Calendar Year-To-Date Per Election for Office Sought	<u> </u>	84527.67	Disburser 2022	ment For:
(a) SUBTOTAL of Itemized Independent Expenditures			• [1964.31
(b) SUBTOTAL of Unitemized Independent Expenditu	res			
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gross, Jennifer, , ,	Electronically Fil	led1 –	M = M	/ D D / Y Y Y Y Y
Signature		Date	e 10	27 2022

				FOR LINE 24 OF FORM 3X				
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼				
WOMEN SPEAK OUT PAC								
				C C00530766				
Check if 24-hour report 48-hour report New report Amends report filed on 48-hour report								
Full Name of Payee The Lukens Company	o Item	Date of Public Distribution/Dissemination						
, ,		10 / 14 / 2022						
Mailing Address 2800 Shirlington Rd		Amount						
City	State	Zip Code		4311.77				
Arlington				Transaction ID : SE.43383				
ŭ .	VA	22200		Date of Disbursement or Obligation				
Purpose of Expenditure Mailer Printing and Production		Category/ Type 00	04	10 14 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Name of Federal Candidate:		Support	Office	e Sought: House District: 00				
KELLY, MARK, , ,		x Oppose		President Senate State: AZ				
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	1056292.90	Disbu 2022	ursement For: Primary				
Full Name of Payee		Memo	o Item	Date of Public Distribution/Dissemination				
The Lukens Company				M M / D D / Y Y Y Y				
Mailing Address				10 14 2022				
2800 Shirlington Rd				Amount				
City	State	Zip Code		4311.77				
Arlington	VA	22206		Transaction ID : SE.43385 Date of Disbursement or Obligation				
Purpose of Expenditure Mailer Printing and Production Category)4	10 14 2022				
Name of Federal Candidate:		Cunnart	Office	Sought: House District: 00				
BEASLEY, CHERI, , ,		Support Oppose	Office	e Sought House				
		X Oppose		Fresident State.				
Calendar Year-To-Date Per Election for Office Sought		88839.44	2022	ursement For: Primary X General				
	1 1			Other (specify)				
(a) SUBTOTAL of Itemized Independent Expenditures			▶	8623.54				
(I) OUDTOTAL of Unitersity of Indiana and ant Europe State of Indiana and Indi								
(b) SUBTOTAL of Unitemized Independent Expenditur	es							
(c) TOTAL Independent Expenditures								
(c) TO TAL Independent Experiences								
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.								
Gross, Jennifer, , ,	Electronically Fil	ed] _	M	0 27 2022				
Signature		Da	ite 1	0 27 2022				

TEMIZED INDEPENDENT EXPENDITURES				PAGE 182 OF 182 FOR LINE 24 OF FORM 3X		
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼		
WOMEN SPEAK OUT PAC				C C00530766		
Check if 24-hour report 48-hour report	New repo	ort Amends repo		M		
Full Name of Payee The Lukens Company	Item Date	of Public Distribution/Dissemination				
Mailing Address 2800 Shirlington Rd			Amou	10 24 2022 unt		
City	State	Zip Code	—Г	92935.14		
Arlington	VA	22206		saction ID : SE.43913 of Disbursement or Obligation		
Purpose of Expenditure Mailer - Printing, Production & Postage		Category/ Type 004		10 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Name of Federal Candidate:		Support	Office Sough	ht: House District:00		
DEMINGS, VAL, , ,		▼ Oppose	Presid			
Calendar Year-To-Date Per Election for Office Sought		147292.44	Disbursemer 2022	nt For:		
Full Name of Payee The Lukens Company		☐ Memo	_	of Public Distribution/Dissemination		
Mailing Address 2800 Shirlington Rd			Amou	int		
City	State	Zip Code	Tran	92935.14 saction ID : SE.43927		
Arlington	VA	22206		of Disbursement or Obligation		
Purpose of Expenditure Mailer - Printing, Production & Postage		Category/ Type 004		10 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Name of Federal Candidate:		Support	Office Sough	<u></u>		
DEMINGS, VAL, , ,		x Oppose	Presid	lent 🗶 Senate State: FL		
Calendar Year-To-Date Per Election for Office Sought	7	240227.58	Disbursemen 2022	nt For: Primary		
(a) SUBTOTAL of Itemized Independent Expenditures			· [185870.28		
(b) SUBTOTAL of Unitemized Independent Expenditure	es		•			
(c) TOTAL Independent Expenditures			•	951147.26		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.						
Gross, Jennifer, , ,	Electronically Fil	[ed] Date	10 /	27 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		